Overview of planned or ongoing studies of drugs for the treatment of COVID-19

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Product; description; Licensed for	Study identifier	Study location	Study design	Primary outcome	Status of trial	Importance
Antiviral drugs						
Remdesivir Nucleoside Inhibitor Not Licensed						
Remdesivir Sponsor: Capital Medical University	https://clinicaltrials.gov/ct2/show/NCT04252664?cond=COVID-19&draw=2&rank=1 NCT04252664	Hubei, China	A Phase 3 Randomised, Double-blind, Placebo-controlled Multicenter Study N=308 hospitalized Adult Patients With Mild and Moderate 2019-nCoV Respiratory Disease randomised to Remdesivir, or placebo	Time to Clinical Recovery defined as the time (in hours) from initiation of study treatment (active or placebo) until normalisation of fever, respiratory rate, and oxygen saturation, and alleviation of cough, sustained for at least 72 hours.	Recruiting; Estimated study completion: April 27, 2020	High
Remdesivir Sponsor: Capital Medical University	https://clinicaltrials.gov/ct2/show/NCT04257656?term=remdesivir&draw=2&rank=1 NCT04257656	Beijing, China	A Phase 3 Randomised, Double-blind, Placebo-controlled, Multicenter Study N= 453 Hospitalized Adult Patients With Severe 2019-nCoVRespiratory Disease ranomised to Remdesivir, or placebo	Time to Clinical Improvement (TTCI), two steps in a Six-category ordinal scale:1 (discharged) to 6 (death), censoring at day 28	Recruiting; Estimated study completion: May 1, 2020	High
Remdesivir Sponsor: National Institute of Allergy and Infectious Diseases (NIAID)	https://clinicaltrials.gov/ct2/show/NCT04280705?term=remdesivir&draw=2&rank=3 NCT04280705 EudraCT number: 2020-001052-18	Up to 50 sites globally; Maryland, Nebraska, Texas, Washington,US; Korea Denmark	Phase 2 Multicenter, Adaptive, Randomised Blinded Controlled Trial N=440 Hospitalized Adults with covid-19 randomised to Remdesivir, or placebo	Percentage of subjects reporting each severity rating on the 7-point ordinal scale (death – not hospitalized), timeframe day 15	Recruiting; Estimated study completion: April 2023	High
Remdesivir Sponsor: Gilead Sciences	NCT04292730 EudraCT number: 2020-000841-15	China, France, Germany, Hong Kong, Italy, Japan, Korea, Netherlands, Republic of Singapore, Spain, Sweden, Taiwan, UK, US	Phase 3 open label randomised controlled trial. N=600 with moderate covid-19 randomised 1:1:1 to Remdesivir 100 mg for 5 days, Remdesivir 100 mg for 10 days, or standard of care	Proportion of participants in each group discharged by day 14.	Recruiting; Estimated study completion May 2020	High

Remdesivir Sponsor: Gilead Sciences	NCT04292899 EudraCT number: 2020-000842-32	China, France, Germany, Hong Kong, Italy, Japan, Korea, Netherlands, Republic of Singapore, Spain, Sweden, Taiwan, UK, US	Phase 3 open label randomised controlled trial. N=400 with severe covid-19 randomised to Remdesivir 100 mg for 5 days, or Remdesivir 100 mg for 10 days.	Proportion of Participants With Normalization of Fever and Oxygen Saturation Through Day 14	Recruiting, Estimated study completion May 2020	High
Remdesivir	Early news: https://www.sciencemag.org/news/2020/03/who-launches-global-megatrial-four-most-promising-coronavirus-treatments WHO Solidarity and Discovery NCT04315948	EU: France, Spain, UK, Germany, Belgium, Netherlands, Luxembourg, Norway N=3200 ROW: Argentina, Bahrain, Canada, Iran, South Africa, Switzerland and Thailand More countries are expected to join. As of March 27 2020, over 70 countries have confirmed they will contribute to the trial	Adaptive, randomised open clinical trial to one of 4 treatments	Subject clinical status (on a 7-point ordinal scale) on Day 15	Recruiting; Estimated study completion: March 2023	High
Remdesivir Expanded Access Treatment IND/Protocol: Allows a large, widespread population access to a drug or biological product that has not been approved by the FDA. This type of expanded access can only be provided if the	NCT04323761	Louisiana, New Jersey, New York	Expanded Access Treatment Protocol: Remdesivir (RDV; GS-5734) for the Treatment of SARS-CoV2 (CoV) Infection Inclusion criteria: Hospitalized with confirmed SARS-CoV2 by polymerase chain reaction (PCR) or known contact of confirmed case with syndrome consistent with coronavirus disease (COVID-19) with PCR pending	Not applicable	Not applicable	Medium

product is already being developed for marketing for the same use as the expanded access use.			Requiring invasive mechanical ventilation			
Remdesivir Expanded access Sponsor: U.S. Army Medical Research and Development Command	NCT04302766	US	Intermediate-Size Patient Population Expanded Access Treatment Protocol for COVID-19; Inclusion criteria: DoD-affiliated personnel as defined in DoDI 6200.02, which includes emergency-essential civilian employees and/or contractor personnel accompanying the Armed Forces who are subject to the same health risk as military personnel	Not applicable	Not applicable	Medium
Lopinavir + Ritonavir (Kaletra) Protease inhibitors HIV infection						
Lopinavir+ Ritonavir Sponsor: Tongji Hospital	https://clinicaltrials.gov/ct2/show/NCT04255017?draw=2 NCT04255017	Tongji Hospital, Hubei, China	Phase 4 single blinded, Prospective, Randomised Controlled Cohort Study to Compare the Efficacy of Three Antiviral Drugs (Abidol Hydrochloride (Umifenovir), Oseltamivir and Lopinavir/Ritonavir) in the Treatment of 2019-nCoV Pneumonia. N=400 patients with CT manifestation of viral pneumonia + mCoV positive randomised to Abidol hydrochloride, Oseltamivir, or Lopinavir/ritonavir	Rate of disease remission (Time Frame: two weeks) Time for lung recovery (Time Frame: two weeks)	Recruiting; Estimated study completion: July 1, 2020	High
Lopinavir + Ritonavir	Early news: https://www.sciencemag.org/news/2020/03/who-launches-global-megatrial-four-most-promising-coronavirus-treatments WHO Solidarity and Discovery	EU: France, Spain, UK, Germany, Belgium, Netherlands, Luxembourg, Norway N=3200 ROW:	Adaptive, randomised open clinical trial to one of 4 treatments	Subject clinical status (on a 7-point ordinal scale) on Day 15	Recruiting; Estimated study completion: March 2023	High

	NCT04315948	Argentina, Bahrain, Canada, Iran, South Africa, Switzerland and Thailand More countries are expected to join				
Lopinavir + Ritonavir in combination with Interferon-beta	Early news: https://www.sciencemag.org/news/2020/03/who-launches-global-megatrial-four-most-promising-coronavirus-treatments WHO Solidarity and Discovery NCT04315948 NCT04330690 (Canadian arm)	EU: France, Spain, UK, Germany, Belgium, Netherlands, Luxembourg, Norway N=3200 ROW: Argentina, Bahrain, Canada, Iran, South Africa, Switzerland and Thailand More countries are expected to join	Adaptive, randomised open clinical trial to one of 4 treatments	Subject clinical status (on a 7-point ordinal scale) on Day 15	Recruiting; Estimated study completion: March 2023	High
Lopinavir and ritonavir	NCT04328285	France, angers, Paris, Saint Etienne	A 2-step randomized double-blind placebo-controlled clinical trial. N=600 health care workers randomised to Lopinavir and ritonavir or placebo First step concerns a trial with hydroxychloroquine, see below	Occurrence of an symptomatic or asymptomatic SARS-CoV-2 infection among healthcare workers [Time Frame: Up to 2.5 months]	Not yet recruiting; Estimated Primary Completion: November 30, 2020	High
lopinavir/ritonavir Hydroxychloroquine Sulfate Losartan Sponsor: Bassett Healthcare	NCT04328012	US	Randomized, double blind, placebo controlled clinical trial N=4000 Hospitalized patients with COVID-19 randomised to lopinavir/ritonavir, Hydroxychloroquine Sulfate, Losartan, or placebo	NIAID COVID-19 Ordinal Severity Scale (NCOSS) [Time Frame: 60 days]	Not yet recruiting; Estimated Primary Completion; January 1, 2021	High

Lopinavir + Ritonavir Sponsor: Darrell Tan	NCT04321174	Canada, Ontario	Post exposure prophylaxis. Open label randomised trial N=1220 High risk close contact with a confirmed COVID-19 case	Microbiologic evidence of infection [Time Frame: 14 days]	Not yet recruiting; Estimated Primary Completion: March 31, 2021	Medium
Lopinavir + Ritonavir vs Interferon 1β vs Low-dose Corticosteroids vs Hydroxychloroquine. Sponsor: University of Oxford	Recovery trial https://www.recoverytrial.net/ EudraCT 2020-001113-21	UK	Adaptive, open label randomised controlled trial. N=2000 hospitalised patients with covid-19 are randomised to 1 of 5 treatment arms in addition to usual standard of care: No additional treatment, Lopinavir-Ritonavir, Interferon 1β, Low-dose Corticosteroids, or Hydroxychloroquine.	In-hospital death, discharge, and need for ventilation. Time frame 28 days	Ongoing	Medium
Lopinavir + Ritonavir Sponsor: Guangzhou 8th People's Hospital	NCT04252885	Guangdong, China	Open label, 125 patients Randomised 2:2:1 to Lopinavir /Ritonavir Tablets, Arbidol, or ordinary treatment	The rate of virus inhibition	Recruiting; Estimated study completion: July 31, 2020	Medium
Lopinavir + Ritonavir Sponsor: First Affiliated Hospital of Zhejiang University	NCT04261907 ChiCTR2000029603 http://www.chictr.org.cn/showproj.aspx?proj=49075	Zhejiang University, China	Randomised, Open-label, Multi-centre Clinical Trial N=160 patients with pneumonia caused by covid-19 randomised to ASC09/ritonavir or lopinavir/ritonavir	The incidence of composite adverse outcome (time frame 14 days)	Recruiting (according to Chinese website that was updated) Estimated study completion: June 30, 2020	Medium
Lopinavir + Ritonavir Sponsor: Tongji Hospital, Tongji Medical College, Huazhong University of Science and Technology	ChiCTR2000029539 http://www.chictr.org.cn/showproj.aspx?proj=48991	Tongji, Hubei, China	Open label study. N=328 Patients with mild covid-19 or unexplained viral pneumonia randomised 1:1 to conventional standardized treatment + Lopinavir/Ritonavir, or conventional standardized treatment	The incidence of adverse outcome within 14 days after admission: Patients with conscious dyspnea, SpO2 = 94% or respiratory frequency = 24 times / min in the state of resting without oxygen inhalation;	Recruiting; From2020-02-03 To 2021-02-02	Medium
Lopinavir + Ritonavir vs Carrimycin; Carrimycin is licenced in China Sponsor: Beijing YouAn Hospital	NCT04286503 ChiCTR2000029867	Beijing YouAn Hospital and other hospitals in China	A Multicenter, Randomised, Open-controlled Study, N=520 patients stratified by severity, Randomised 1:1 to 1) carrimycin or 2) lopinavir/ritonavir or arbidol or chloroquine phosphate	Fever to normal time (day) (Time Frame: 30 days) Pulmonary inflammation resolution time (HRCT) (day) (Time Frame: 30 days) Negative conversion (%) of 2019-nCOVRNA in gargle (throat swabs) at	Not yet recruiting; Estimated study completion, Feb 28, 2021	Medium

				the end of treatment (Time Frame: 30 days		
Lopinavir + ritonavir Hydroxychloroquine sulfate Baricitinib (janus kinase inhibitor) Sarilumab (anti-IL-6 receptor)	NCT04321993	Canada	Open label clinical trial. N=1000 hospitalised patients with moderate to severe COVID-19 randomised to Lopinavir + ritonavir, Hydroxychloroquine sulfate, Baricitinib, Sarilumabt, or standard care	Clinical status of subject at day 15 (on a 7 point ordinal scale).	Not yet recruiting; Estimated Primary Completion: February 2021	Medium
Lopinavir + Ritonavir	http://www.chictr.org.cn/showprojen.aspx?proj=48824 ChiMCTR2000002940	Wuhan, China	N=60 randomised to traditional Chinese medicine, Lopinavir/ritonavir, or traditional Chinese medicine + lopinavir/ritonavir	The rate of remission	Not Recruiting; Estimated study completion: Dec 31, 2020	Low
Lopinavir + Ritonavir	NCT04276688	Hong Kong	Phase 2 study Open-label randomised controlled trial among adult patients hospitalized and confirmed covid-19 infection N=70 hospitalised patients with confirmed covid 19 infection randomised to Lopinavir/ritonavir, Ribavirin, or Interferon Beta-1B	Time to negative nasopharyngeal swab (NPS) 2019-n-CoV coronavirus viral RT-PCR	Recruiting; Estimated study completion: July 31, 2022	Low
Lopinavir + Ritonavir + interferon +/- ribavirin	ChiCTR2000029387 http://www.chictr.org.cn/showproj.aspx?proj=48782 Link to study protocol: https://www.ncbi.nlm.nih.gov/research/coronavirus/publication/32149772	Chongqing, China	N= 108 patients with mild or moderate covid-19 randomised to Ribavirin + Interferon alpha-1b, lopinavir / ritonavir + interferon alpha-1b, or Ribavirin + LPV/r+Interferon alpha-1b;	The time to 2019-nCoV RNA negativity in patients;	Recruiting Study execute time: From 2020-01-25 to 2021-01-25	Low
Lopinavir + Ritonavir	ChiCTR2000030187 http://www.chictr.org.cn/showproj.aspx?proj=50057	Hubei, China	N=60 randomised to lopinavir/ritonavir, or Routine symptomatic support treatment	Endotracheal intubation rate, time frame: 14 days Mortality, time frame: 14 days	Not yet recruiting; From2020-02-25 To 2020-03-10	Low
Lopinavir + Ritonavir vs Chloroquine	NCT04307693	Seoul, Republic of Korea	Multicenter, open labelled, randomized clinical trial N=150 with mild covid-19 Randomised to Lopinavir/Ritonavir,	Viral load (Time Frame 18 days)	Recruiting; Estimated study completion: May 2020	Low

			Hydroxychloroquine, or Conventional treatment			
Lopinavir + Ritonavir vs Arbidol vs ASC09/ Ritonavir (ASC09F)	ChiCTR2000029759 http://www.chictr.org.cn/showproj.aspx?proj=49352	Chongqing	A multicenter, randomised, open label, controlled trial 60 patients randomised to Lopinavir / Ritonavir (Kaletra) + IFN aerosol inhalation, Abidol and IFN aerosol inhalation, or ASC09/ Ritonavir (ASC09F) and IFN aerosol inhalation	Time to recovery.	From2020-02-15 To 2020-05-01	Low
Lopinavir + Ritonavir + emtritabine /Tenofovir alafenamide fumarate	ChiCTR2000029468 http://www.chictr.org.cn/showproj.aspx?proj=48919	Sichuan, China	Single arm study with historical controls Patients with covid-19 N=60 in the intervention arm N=60 historical controls	Patient survival rate	Not yet recruiting; From 2020-02-01 To 2020-06-30	Low
Lopinavir + Ritonavir vs pinavir + ritonavir vs ritonavir	ChiCTR2000030218 http://www.chictr.org.cn/showproj.aspx?proj=50115	Jiangxi, China	Randomised trial, blinding not stated; N=80 with mild or moderate covid-19 treated with Pinavir / ritonavir tablets combined with Xiyanping injection, or Ritonavir, or Lopinavir/ritonavir combined with Xiyanping injection	Clinical recovery time; Pneumonia Severity Index (PSI) score	Recruiting; From2020-01-22 To 2020-06-25	Low
Favipiravir (Avigan) (T-705 or favilavir); Experimental antiviral drug. Pyrazinecarboxamide derivative viral RNA polymerase inhibitor; Licenced for influenza in Japan	http://www.chictr.org.cn/showprojen.aspx?proj=49015 ChiCTR2000029548	Zhejiang, China	N=30, Randomised 1:1:1 to BaloxavirMarboxil, Favipiravir, or Lopinavir-Roitonavir; ritonavir	Primary outcome: time to negative PCR and time to clinical improvement	Not recruiting; Estimated study completion: June 2020	Medium
Favipiravir (or T-705 or Avigan)	http://www.chictr.org.cn/showprojen.aspx?proj=49013 ChiCTR2000029544	Zhejiang, China	N= 30 with Coronavirus pneumonia Randomised 1:1:1 to antiviral treatment + Baloxavir, antiviral treatment + Marboxil, or antiviral treatment	Primary outcome: time to negative PCR Time to clinical improvement	Not recruiting; Estimated study completion: June 2020	Low

Favipiravir	http://www.chictr.org.cn/showprojen.aspx?proj=49988 ChiCTR2000030113	Guangdong, China	N=30 with corona pneumonia with poorly responsive ritonavir Randomised to ritonavir or favipiravir	Blood routine tests, Liver function examination, Renal function examination, Blood gas analysis, Chest CT examination	Recruiting; Estimated study completion: May 31, 2020	Low
Fapilavir Approved by China for covid-19 treatment by February 17, 2020.	ChiCTR2000029996 http://www.chictr.org.cn/showproj.aspx?proj=49510	Beijing, China	Randomised, open label, controlled trial. N=60 patients with covid-19 of ordinary type randomised to low, middle or high dose fapilavir for 10 days	Time to Clinical Recovery defined as normal body temperature and cough relief	Recruiting	Low
Favipiravir + bromhexine	NCT04273763	China, Zhejiang	Open label N=60 with mild corona pneumonia randmised 1:1 to favipiravir + interferon-alfa + arbidol hydroglhoride + interferon alfa2b, or arbidol hydroglhoride + interferon alfa2b	Time to clinical recovery after treatment	Enrolling by Invitation Estimated study completion: April 30, 2020	Low
Farpiravir	ChiCTR2000030254 http://www.chictr.org.cn/showproj.aspx?proj=50137	Hubei, China	Randomised, open label, controlled trial. N=240 with covid-19 randomised to farpiravir or abidole	Pulse oxygen saturation, Respiratory support, nucleic acid test of novel coronavirus	Recruiting; From2020-02-20 To 2020-03-20	Low
Favipiravir + Tocilizumab Sponsor: Peking University First Hospital	NCT04310228	Anhui, Beijing, Hubei, China	Open label randomised controlled trial N=150 randomised to Favipiravir + Tocilizumab, Favipiravir, or Tocilizumab	Clinical cure rate [Time Frame: 3 months]	Recruiting Estimated completion date= May 2020	Medium
Favipiravir Sponsor: Peking University First Hospital	NCT04333589	Anhui, Hubei, Zhejiang China	Open label randomised controlled trial N=210 patients who have cleared the virus randomised to Favipiravir, or Standard of care	Viral nucleic acid test negative conversion rate [Time Frame: 5 months]	Not yet recruiting; Estimated Primary Completion: June 1, 2020	Low
Darunavir + cobicistat + chloroquine Antiretroviral, protease inhibitor. Used with low doses of cobicistat to increase bioavailability and half-life; Approved for HIV	NCT04304053	Barcelona, Spain	Phase 3, Open label cluster randomised trial N= 3040 participants Randomised to antiviral and prophylaxis: darunavir 800 mg / cobicistat 150 mg and chloroquine Contacts will be offered a prophylactic regimen of chloroquine Active comparator: no intervention	Incidence of secondary COVID-19 cases	Not yet recruiting; Estimated study completion: July 15, 2020	High

Darunavir and Cobicistat	ChiCTR2000029541 http://www.chictr.org.cn/showprojen.aspx?proj=48992	Hubei, China	Randomised, open label study N=100 patients with covid-19 randomised to darunavir/cobicistat, lopinavir/ritonavir combined, or conventional treatment	Time to conversion of 2019-nCoV RNA result from RI sample	Dec 01, 2020	Low
Darunavir and Cobicistat	NCT04252274	China, Shanghai	Phase 3, randomised, open label N=30 patients with covid-19 randomised to Darunavir and Cobicistat or Conventional treatment	The virological clearance rate of throat swabs, sputum, or lower respiratory tract secretions at day 7 [Time Frame: 7 days after randomization]	Estimated primary completion date/ Estimated study completion: August 31, 2020/December 31, 2020	Low
Danorevir + ritonavir	ChiCTR2000030259 http://www.chictr.org.cn/showproj.aspx?proj=49918	Shanghai	Randomised, open label controlled trial. N=60 patients with mild and moderate covid-19 randomised to Danorevir or Symptomatic treatment	Rate of composite advers outcomes: SpO2, PaO2/FiO2, respiratory rate	Recruiting; From2020-02-22 To 2020-04-30	Low
Oseltamivir (Tamiflu) Oseltamivir vs ASC09F + Oseltamivir vs Ritonavir + Oseltamivir	NCT04261270	Tongji Hospital, China	60 patients with covid-19 randomised to ASC09F + Oseltamivir, Ritonavir + Oseltamivir, or Oseltamivir	Rate of comprehensive adverse outcome (Time Frame: 14 days) defined as low Oxygen saturation and high respiration rate	Not yet recruiting; Estimated study completion: July 1, 2020	Low
Umifenovir (Arbidol) Umifenovir is an antiviral treatment for influenza used in Russia and China	http://apps.who.int/trialsearch/Trial2.aspx?TrialID=NCT04246242	Xiangya Hospital of Central South University	Phase 4 A Randomised Multicenter Controlled Clinical Trial N=500 with covid-19 infection randomised to 200 mg, 400 mg or conventional treatment	Mortality (time frame 28 days)	Not yet recruiting	Low
Umifenovir + interferon (PegIFN-α-2b)	NCT04254874	Tongji Hospital, China	Phase 4 Open, Prospective, Randomised Controlled Cohort Study N=100 randomised to arbidol Hydrochloride (Umifenovir), or Arbidol Hydrochloride Combined With Interferon Atomization	Rate of disease remission (Time Frame: two weeks) Time for lung recovery (Time Frame: two weeks)	Not yet recruiting; Estimated study completion date: July 1, 2020	Low
Umifenovir	ChiCTR2000029621 http://www.chictr.org.cn/showproj.aspx?proj=49165	Shanghai, China	Multicenter, randomised, open-label, controlled trial N= 380 patients with mild or moderate covid-19	Virus negative conversion rate in the first week	Recruiting; From2020-01-01 To 2020-12-31	Low

Umifenovir, Novaferon, lopinavir/litonavir	ChiCTR2000029573 http://www.chictr.org.cn/showproj.aspx?proj=49065	Zhejiang, China	N=600 randomised 1:1:1:1:1:1: to arbidol, Novaferon + arbidol, Lopinavir/litonavir, Arbidol, Novaferon, lopinavir/litonavir, or Novaferon + arbidol	2019-nCoV nucleic acid test confirmed negative;	Not yet recruiting From2020-02-05 To 2020-06-30	Low
Umifenovir	NCT04260594	Jieming QU, Ruijin Hospital	Phase 4, Randomised, Open, Multicenter Study N=380 with covid-19 randomised to arbidol or basic treatment	Virus negative conversion rate in the first week	Not recruiting yet; Estimated primary completion date/ Estimated study completion: July 1, 2020/ December 30, 2020	Low
Umifenovir Sponsor: Union Hospital, Tongji Medical College, Huazhong University of Science and Technology	ChiCTR2000029592 http://www.chictr.org.cn/showproj.aspx?proj=49069	Hubei China	Post exposure prophylaxis Observational study High-risk population including medical staff on duty during the outbreak of 2019-nCoV. N=1000 2 cohorts treated with Arbidol or no Arbidol	2019-nCoV RNA;2019-nCoV antibody;Chest CT;	Not yet recruiting; From2020-02-05 To 2020-08-31	Medium
Other						
Oseltamivir, lopinavir, ritonavir, favipiravir, darunavir, chloroquine	NCT04303299	Bangkok, Thailand	A 6 Week Prospective, Open Label, Randomized, in Multicenter Study N=80 stratified by severity: Mild COVID19: Oseltamivir Plus Chloroquine, Lopipinavir/ Ritonavir Plus Oseltamivir, Lopipinavir/ Ritonavir Plus Favipiravir, or Conventional qurantine Moderate to Critically Ill COVID19: Lopipinavir/ Ritonavir Plus Oseltamivir, Favipiravir Plus Lopipinavir / Ritonavir, Darunavir/ Ritonavir Plus Oseltamivir Plus Chloroquine, Favipiravir Plus Darunavir, Ritonavir Plus Chloroquine	SARS-CoV-2 eradication time	Not yet recruiting; Estimated study completion: November 30, 2020	Low

Azvudine, nucleoside reverse transcriptase inhibitor Currently investigated in phase 3 studies for the treatment of HIV	ChiCTR2000029853 http://www.chictr.org.cn/showproj.aspx?proj=49532	He'nan, China	Randomised, open label N=20 randomised to Azvudine or conventional treatmet	Several of primary clinical endpoints.	Recruiting, From2020-02-16 To 2020-04-16	Low
Azvudine	ChiCTR2000030424 http://www.chictr.org.cn/showproj.aspx?proj=50174	He'nan, China	Single arm study N=30 treated with azvudine	conversion rate	Not yet recruiting From2020-03-02 To 2022-05-02	Low
Azvudine	ChiCTR2000030041 http://www.chictr.org.cn/showproj.aspx?proj=49891		Single arm study of 20 patients with common or severe type covid-19 treated with azvudine on top of conventional treatment	The novel coronavirus nucleic acid negative rate	Not yet recruiting; From2020-02-21 To 2020-06-30	Low
Azvudine	ChiCTR2000030487 http://www.chictr.org.cn/showproj.aspx?proj=50507	He'nan, China	Single arm, N=10 treated with azvudine	Conversion time	Recruiting From2020-03-04 To 2020-05-04	Low
Triazavirin Developed in Russia has been investigated for the treatment of influenza and other virus infections. Sponsor: Health commission of Heilongjiang province	ChiCTR2000030001 http://www.chictr.org.cn/showproj.aspx?proj=49723	Heilongjiang, China	A multicenter, randomised, double blinded, placebo-controlled trial N=240 randomised to Triazavirin or conventional treatment	Time to Clinical recovery	Recruiting; From2020-02-15 To 2020-05-28	Medium
Novaferon New antiviral drug developed in China	ChiCTR2000029496 http://www.chictr.org.cn/showproj.aspx?proj=48809	Huhan, China	Randomised controlled trial. N=90 with covid-19 randomised to Novaferon, Kaletra, or Novaferon+ Kaletra	Time to negative testing	Recruiting	Low
DAS181 for compassionate use. Currently investigated for the treatment of parainfluenzavirus infection	NCT04324489	China, Hubei	Single group assignment, N=4 with4severe COVID-19	Improved clinical status	Recruiting; Estimated Primary Completion Date: April 25, 2020	Low

Immune modulating drugs						
Immunoglobulins						
Anti-SARS-CoV-2 virus inactivated plasma Sponsor: Wuhan Jinyintan Hospital (Wuhan Infectious Diseases Hospital)	ChiCTR2000030010; http://www.chictr.org.cn/showproj.aspx?proj=49777	Hubei	Randomised double blinded parallel-controlled trial Patients with severe covid-19. N=100 randomised to Anti-SARS-CoV-2 virus inactivated plasma, or conventional treatment	Improvement of clinical symptoms (Clinical improvement is defined as a reduction of 2 points on the 6-point scale of the patient's admission status or discharge from the hospital)	Not yet recruiting; From2020-02-19 To 2020-05-31	High
Hyperimmune plasma	NCT04321421	Italy San Matteo Hospital	Interventional, open label N=49 Age: 18 and above	Death within 7 days (death from any cause) Longitudinal assessment of COVID-19 pts treated with hyperimmune plasma	Active, not recruiting Initiated on Mar 17, 2020	High
Human Coronavirus Immune Plasma Sponsor: Sidney Kimmel Comprehensive Cancer Center at Johns Hopkins	NCT04323800	Not stated yet	Prevention study A Randomized, Blinded Phase 2 Study, double-blinded randomised trial. N=150 participants defined as Close contact exposure to person with COVID-19 within 96 hours of enrolment. Participants will be randomised to Anti-SARS-coV-2 plasma or SARS-CoV-2 non-immune Plasma	Cumulative incidence of composite outcome of disease severity [Time Frame: Day 28]: Death; Requiring mechanical ventilation and/or in ICU; non-ICU hospitalization, requiring supplemental oxygen; non-ICU hospitalization, not requiring supplemental oxygen; Not hospitalized, but with clinical and laboratory evidence of COVID-19 infection; Not hospitalized, no clinical evidence of COVID-19 infection, but with positive PCR for SARS-CoV-2	Not yet recruiting; Estimated Primary Completion: December 31, 2022	High
Infusion of blood plasma from COVID-19 survivors	Very early news https://www.straitstimes.com/world/france-to-test-plasma-of-coronavirus-survivors-to-treat-sick Paris hospital authority AP-HP, the National Medical Research Institute INSERM, and	France	Randomised, half to receive convalescent plasma N=60	TBD	Not recruiting	

	the National Blood Service EFS					
Convalescent Plasma	NCT04332835	Columbia	Open label randomised trial. N= 80 patients with moderate COVID-19 Randomised to Convalescent Plasma + azithromycin + hydroxychloroquine or azithromycin + hydroxychloroquine	Change in Viral Load [Time Frame: Days 0, 4, 7, 14 and 28] Change in Immunoglobulin M COVID-19 Titers [Time Frame: Days 0, 4, 7, 14 and 28] Change in Immunoglobulin G COVID-19 Titers [Time Frame: Days 0, 4, 7, 14 and 28] I	Not yet recruiting; Estimated Primary Completion: August 31, 2020	Low
Convalescent Plasma	NCT04333251	Not stated	Phase 1 randomised trial. N=115 hospitalised patients randomised to Convalescent Plasma or oxygen therapy	reduction in oxygen and ventilation support	Estimated Primary Completion: December 31, 2022	Low
Convalescent Plasma	NCT04333355	Mexico	Phase 1 study, single arm. N=20 patients with Serious or life-threatening infection defined.	Adverse effects	Estimated Primary Completion: December 20, 2020	Low
Immunoglobulin Sponsor: Peking Union Medical College Hospital	NCT04261426	Tongji Hospital	Phase 2/3 randomised, Open-label, Controlled, Single-center Study N=80 patients with severe or critically ill covid19 respiratory disease randomised to IV immunoglobulin or standard care	1. Clinical improvement based on the 7-point scale (discharged to death) [Time Frame: 28 days after randomization] 2. and 3. Lower murray lung injury score (day 7 and day 14)	Not recruiting yet; Estimated primary completion date/ Estimated study completion: April 30, 2020/ June 30, 2020	Low
Immunoglobulin	NCT04264858	China, Hubei	An Exploratory Clinical Study N=10 patients with severe covid19. Treatment: immunoglobulin From cured 2019-nCoV Pneumonia Patients Or gammaglobulin	Time to Clinical Improvement (decline of two categories a six-category ordinal scale of clinical status which ranges from 1 (discharged) to 6 (death).)	Not recruiting yet; Estimated primary completion date/ Estimated study completion: April 30, 2020/ May 31, 2020	Low
Anti-SARS-CoV-2 Inactivated Convalescent Plasma	NCT04292340	China, Shanghai	Case-Only, observational study: The Efficacy and Safety of Anti-SARS-CoV-2 Inactivated Convalescent Plasma in the Treatment of Novel Coronavirus Pneumonia Patient (COVID-19) N=15	The virologic clearance rate	Recruiting; Estimated study completion: December 31, 2020	Low

Convalescent plasma treatment	ChiCTR2000029850; http://www.chictr.org.cn/showproj.aspx?proj=49533	Zhejiang, China	Prospective cohort study; N=20 with severe covid-19	Fatality rate	Recruiting; From2020-02-15 To 2022-02-15	Low
Convalescent plasma treatment	ChiCTR2000030039 http://www.chictr.org.cn/showproj.aspx?proj=49544	Jiangsu	90 patients with normal to critical covid-19. N=30 treated with convalescent plasma N=60 treated with conventional therapy	SARS-CoV-2 DNA, And SARS-CoV-2 antibody levels	Recruiting, Unknown end-date	Low
Anti-2019-nCoV inactivated convalescent plasma	ChiCTR2000030046 http://www.chictr.org.cn/showproj.aspx?proj=49861	Hubei, China	Single arm study of 10 patients with Anti-2019-nCoV virus inactivated plasma	Several outcomes, the changes of clinical symptom, laboratory and radiological data etc.	Recruiting; From2020-02-07 To 2020-04-07	Low
Convalescent plasma	ChiCTR2000030627 http://www.chictr.org.cn/showproj.aspx?proj=50727	He'nan, China	Randomised controlled trial. N=30 patients with severe or critical covid-19 randomised 1:1 to convalescent plasma or conventional treatment	Temperature, Virus nucleic acid detection	Recruiting; From2020-02-01 To 2020-05-30	Low
Hyperimmune Plasma	NCT04321421	Pavia, PV, Italy	Single arm treatment of 49 patients with moderate to severe COVID-19 undergoing mechanical ventilation or continuous positive airway pressure.	death [Time Frame: within 7 days]	Active, not recruiting; Estimated primary completion: May 31, 2020	Low
Convalescent Plasma	NCT04325672	United States, Minnesota	An Open Label, Phase 2A Study of High-Titer Anti-SARS-CoV-2 Plasma in Hospitalized Patients With COVID-19 N=20 patients	Change in RNA levels of SARS-CoV-2 from nasopharyngeal across time; ICU Admissions; In-hospital mortality; Hospital Length of Stay	Not yet recruiting; Estimated Primary Completion: December 31, 2022	Low
Convalescent Plasma	NCT04327349	Iran	Single group assignment; N=30	15 primary outcomes stated, among those, 10- and 30 days mortality	Enrolling by invitation	Low
Convalescent Plasma	NCT04332380	Columbia	Single arm study of N=10 patients hospitalised with COVID-19	Change in Viral Load; Change in Immunoglobulin M and G COVID-19 antibodies Titers	Estimated Primary Completion: August 31, 2020	Low
Anti-SARS-CoV-2 inactivated convalescent plasma	ChiCTR2000030381 http://www.chictr.org.cn/showproj.aspx?proj=50290	Hubei, China	Randomized, open-label, controlled and single-centre trial N=40 patients with moderate covid-19	Clinical symptom improvement rate: improvement rate of clinical symptoms = number of cases with clinical symptom improvement /number of enrolling cases * 100%	Not yet recruiting From2020-02-29 To 2020-05-31	Low
~~Anti-SARS-CoV-2 inactivated convalescent plasma~~	~~ChiCTR2000030312 http://www.chictr.org.cn/showproj.aspx?proj=50258~~	~~Hubei, China~~	~~Single arm n=24 treated with anti-SARS-CoV-2 inactivated convalescent plasma~~	~~Clinical symptom improvement rate: improvement rate of clinical symptoms = number of cases with clinical symptom improvement /number of enrolling cases * 100%~~	~~Cancelled due to modification of protocol (new study number (ChiCTR2000030381)~~	~~Low~~

Monoclonal antibodies						
Tocilizumab Approved for rheumatoid arthritis Sponsor: The First Affiliated Hospital of University of science and technology of China (Anhui Provincial Hospital)	ChiCTR2000029765 http://www.chictr.org.cn/showprojen.aspx?proj=49409	Anhui, China	Phase 4, Randomised controlled trial. Blinding not stated N=198 Severe cases of covid19 randomised to tocilizumab, or conventional treatment	Cure rate	Recruiting May 10, 2020	High
Tocilizumab Sponsor: Roche	NCT04320615 EudraCT: 2020-001154-22	Canada Denmark France Germany Ireland Italy Netherlands Spain Sweden Switzerland United Kingdom United States	Randomized, Double-Blind, Placebo-Controlled, Multicenter Study N=330 Patients With Severe COVID-19 randomised to Tocilizumab or placebo	Clinical Status Assessed Using a 7-Category Ordinal Scale [Time Frame: Day 28]	Ongoing Estimated study completion: September, 2021	High
Tocilizumab sarilumab	NCT04322773 EudraCT: 2020-001275-32	Denmark	An Open-Label, Multicenter Sequential and Cluster Randomized Trial; N=200 patients with severe COVID-19 randomised to RoActemra iv, RoActemra sc, Kevzara sc, or Standard medical care	Time to independence from supplementary oxygen therapy	Not yet recruiting; Estimated Primary Completion: June 1, 2021	High
Tocilizumab Sponsor: Assistance Publique - Hôpitaux de Paris	NCT04331808	Not stated	Randomized Controlled Trials Open-label. N=240 patients included in the CORIMUNO-19 cohort	Survival without needs of ventilator utilization at day 14; WHO progression scale <=5 at day 4; Cumulative incidence of successful tracheal extubation; WHO progression scale <=7 at day 4	Not yet recruiting; Estimated Primary Completion: March 31, 2021	Medium
Tocilizumab (protocol in Italian)	2020-001386-37	Italy	N=398	ICU admission, death, or clinical deterioration	Ongoing	Medium

Tocilizumab TOCIVID-19	Eudract number:2020-001110-38 NCT04317092	Italy, Multicentre	Multicenter single-arm, open-label, phase 2 study on the efficacy and tolerability of tocilizumab in the treatment of patients with COVID-19 pneumonia Control: retrospective observational cohort Sample size (estimated) N = 330	Mortality rate one month after registration	Ongoing Estimated primary completion/estimated study completion Dec 2020/Dec 2022	Medium
Tocilizumab + Hydrozychloroquine + Azitrhomycin	NCT04332094	Barcelona, Spain	Randomised open label study. N=276 hospitalised patients randomised to Tocilizumab + Hydrozychloroquine + Azitrhomycin, or Hydrozychloroquine + Azitrhomycin	In-hospital mortality; Need for mechanical ventilation in the Intensive Care Unit	Not yet recruiting; Estimated Primary Completion Date_ September 2020	Medium
Tozilizumab + Pembrolizumab	NCT04335305	Not stated	A Multicenter, Randomized, Open-Label, Phase II Trial N=24 patients with severe COVID-19 randomised to Tozilizumab + Pembrolizumab or standard of care	Percentage of patients with normalization of SpO2 ≥96%	Not yet recruiting; Estimated Primary Completion: May 15, 2020	Medium
Tocilizumab	NCT04331795	United States, Illinois	Single arm study N=50 hospitalised patients with COVID-19	Clinical response and biological response	Not yet recruiting; Estimated Primary Completion: July 1, 2020	Low
Tocilizumab + ivig (human antibodies?) + CRRT (continuous renal replacement therapy?)	ChiCTR2000030442 http://www.chictr.org.cn/showproj.aspx?proj=50380	Shaanxi, China	Single arm study of 100 patients with severe covid-19	In hospital time	Not yet recruiting From2020-03-05 To 2020-05-15	Low
Tocilizumab; Sponsor: Tongji hospital	NCT04306705	Tongji hospital, Hubei, China	A Retrospective Study N=120 with cytokine release syndrome with Serum IL-6 ≥3 times the upper limit of normal treated with Tocilizumab or Continuous Renal Replacement Therapy	Proportion of Participants With Normalization of Fever and Oxygen Saturation Through Day 14	Recruiting; Estimated completion: June 2020.	Low
Tocilizumab Sponsor: Università Politecnica delle Marche	NCT04315480	Ancona, AN, Italy	Single arm study N=30 with severe covid-19	Rate of patients with no need in increase of FiO2 to maintain stable SO2 and no need of intubation; improving in pulmonary function [Time Frame: 7 days]	Not yet recruiting; Estimated Study Completion May 2020	Low
Tocilizumab	NCT04332913	Italy	This is a prospective observational clinical study N=30	Percentage of patients with complete recovery defined as fever disappearance and return to normal SpO2 after 14 days from the end of treatment with tocilizumab.	Not yet recruiting; Estimated Primary Completion; December 31, 2020	Low

sarilumab (Kevzara) IL-6 blocking Mab Sponsor: Regeneron + Sanofi	NCT04315298	USA Multicenter	RCT, double-blind, placebocontrolled, on top of supportive care. Ph2 Ph3 (adaptive, depends on Ph2 results) N=400 Adults hospitalized with serious complications from COVID-19	Ph2: fever, O2 need Ph3: longterm outcomes (e.g. death, hospitalisation, ventilation, O2 supply etc)	Recruiting – March 2020 Estimated completion March 2021	High
sarilumab (Kevzara) IL-6 blocking Mab Sponsor: Sanofi	EudraCT nr.: 2020-001162-12 Sarilumab COVID-19 Protocol number: EFC16844	Canada France Germany Israel Italy Japan Russian Federation Spain	An adaptive phase 2/3, randomized, double-blind, placebo-controlled study assessing efficacy and safety of sarilumab for hospitalized patients with COVID-19 (Sarilumab COVID-19). Phase 2 n= 100 Phase 3 n= 200	Ph2: resolution of fever or discharge Ph3: adaptive design. PEP depends on Ph2 results.	Ongoing	High
Sarilumab	NCT04327388 Same as EudraCT nr.: 2020-001162-12?	France	An Adaptive Phase 2/3, Randomized, Double-blind, Placebo Controlled Study Assessing Efficacy and Safety of Sarilumab for Hospitalized Patients With COVID19 N=300,	Time to resolution of fever for at least 48 hours without antipyretics or until discharge, Phase 3: The percentage of patients reporting each severity rating on the 7-point ordinal scale [Time Frame: Baseline to Day 15	Recruiting; Estimated Primary Completion: July 30, 2020	High
sarilumab (Kevzara) IL-6 blocking Mab vs tocilizumab (Roactemra) Sponsor: Assistance Publique - Hôpitaux de Paris	EudraCT: 2020-001246-18 NCT04324047 CORIMUNO-19 trial	France	Randomised, open label trial. Moderate, severe or critical COVID-19 N=1000 randomised to sarilumab, tocilizumab, or standard of care.	For patients not requiring ICU: Co Primary Endpoints 1. Survival without needs of ventilator utilization at day 14. 2. Early end point: OMS progression scale < or = 5 at day 4 For patients requiring ICU: Co Primary Endpoints 1. Cumulative incidence of successful tracheal extubation at day 14. 2. Early end point: OMS progression scale >7 at day 4	Recruiting; March 26, 2021	Medium
sarilumab (Kevzara) IL-6 blocking Mab vs standard of care Sponsor: Assistance Publique - Hôpitaux de Paris	NCT04324073 CORIMUNO-19 - SARI	France	Bayesian open labelled randomized clinical trial N=240 patients with moderate or severe COVID-19 randomised to sarilumab or standard of care	Survival without needs of ventilator utilization at day 14; WHO progression scale <=5 at day 4; Cumulative incidence of successful tracheal extubation; WHO progression scale <=7 at day 4	Recruiting; Estimated Primary Completion: March 27, 2021	Medium

Meplazumab; Sponsor: Tang-Du Hospital Meplazumab is not approved. Considered a Chinese drug in development	NCT04275245	China, Shaanxi	Phase 1/2 Open label, single arm N=20 with pneumonia	Virological clearance rate (time frame 14 days)	Recruiting; Estimated study completion: Dec 31, 2020	Low
Bevacizumab; Approved for certain cancers; Sponsor: Qilu Hospital of Shandong University	NCT04275414	China, Shandong	Phase 2/3 single group assignment N=20 severe and critical COVID-19 patients	Partial arterial oxygen pressure at 24 hours, 72 hours and 7 days	Recruiting; Estimated study completion: May 2020	Low
Bevacizumab; Sponsor: Qilu Hospital of Shandong University	NCT04305106	China, Shandong	Double blinded multicentre randomised controlled trial N=118 Severe or Critical Patients With COVID-19 Randomised to bevacixumab. No comparator	Proportion of patients whose oxygenation index increased by 100mmhg on the 7th day after admission [Time Frame: On the 7th day after admission]	Not yet recruiting: Estimated study completion: May 31, 2020	Medium
Eculizumab (Soliris); Modulation of the complement system; Sponsor: Hudson Medical Expanded access	NCT04288713	US?	Expanded access. The drug is being used in a protocol for the treatment of covid-19. Awaits FDA approval.	Not applicable	Not Applicable	Medium
vMIP viral macrophage inflammatory protein, chemokine; Sponsor: Union Hospital, Tongji Medical College, Huazhong University of Science and Technology	ChiCTR2000029636 http://www.chictr.org.cn/showproj.aspx?proj=49215	Hubei, China	Single arm, case series. Moderate or severe covid-19	2019-nCoV nucleic acid turning negative time (from respiratory secretion), or the time to release isolation	Recruiting; From2020-02-07 To 2020-07-3	Low
Tozumab + adamumab (adalimumab?)	ChiCTR2000030580 http://www.chictr.org.cn/showproj.aspx?proj=50693	Hubei, China	Parallel intervention study, N=60 patients with severe or critical covid-19 randomised to tozumab + adamumab	Several primary outcomes: chest CT, coronavirus detection, IL6 etc.	Recruiting; From2020-02-01 To 2020-04-30	Low
Adalimumab	ChiCTR2000030089 http://www.chictr.org.cn/showproj.aspx?proj=49889	Shanghai, China	A randomized, open-label, controlled trial N= patients with severe or critical covid-19	TTCI (Time to Clinical Improvement)	Not yet recruiting; From2020-02-28 To 2020-08-31	Low
Siltuximab (Sylvant) IL-6 blocking Mab Sponsor: EUSA Pharma	NCT04322188	Italy, Bergamo	Retrospective case-control study (compassionate use vs matched controls) N=50	Reduction in the need of invasive ventilation, time spent in ICU or 30-day mortality	Recruiting; Estimated Primary Completion: May 19, 2020	Low

Siltuximab vs Methylprednisolone	NCT04329650	Barcelona, Spain	Phase 2, Randomized, Open-label Study to Compare Efficacy and Safety of Siltuximab vs. Corticosteroids in Hospitalized Patients With COVID19 Pneumonia N=100	Proportion of patients requiring ICU admission at any time within the study period. [Time Frame: 29 days]	Not yet recruiting; Estimated Primary Completion: May 20, 2020	Medium
IFX-1, monoclonal antibody which specifically binds to the soluble human complement split product C5a. Sponsor: InflaRx GmbH Not approved.	EudraCT Number: 2020-001335-28 ClinicalTrials.gov Identifier: NCT04333420	NL	A pragmatic adaptive open label, randomized Phase II/III multicenter study of IFX-1 in Patients with severe COVID-19 Pneumonia - "PANAMO" N=130 BSC + IFX-1 vs BSC	Change in PaO2/FiO2 [Time Frame: Baseline to Day 5	Recruiting Estimated Primary Completion: October 31, 2020	High
Gamifant (emapalumab) - (IFNγ) blocking antibody - FDA approved for primary haemophagocytic lymphohistiocytosis (HLH). Kineret (anakinra) – IL-1 receptor antagonist FDA + EMA approved for CAPS, Still's disease, FMF, RA	Eudra-CT: 2020-001167-93 NCT04324021 Sobi.IMMUNO-101	Italy	Randomized, Open-label, Parallel Group, 3-arm, Multicenter Study N = 54 Active: Emapalumab (n=18) Active: Anakinra (n=18) Comparator: SOC (n=18) Adult COVID-19 with respiratory distress	Treatment success [Time Frame: Up to Day 15] Defined as the proportion of patients not requiring invasive mechanical ventilation or Extracorporeal membrane oxygenation (ECMO)	Not yet recruiting (30-03-2020) Estimated study completion Sep 2020	High
Leronlimab, PRO140. CCR5 antagonist Not yet licensed, but several completed or ongoing CT in patients with HIV or triple-negative breast cancer.	Phase 2b/3 study in severely ill patients, and a phase 2 in mild-to-moderately ill patients. The trials are following the former phase 2 study in critically ill patients. This study was conducted in NY https://www.clinicaltrialsarena.com/news/cytodyn-leronlimab-covid-19-second-trial/ https://www.onclive.com/web-exclusives/leronlimab-covid19-trial-treats-first-patients https://www.cytodyn.com/newsroom/press-	US	Multi centre. 342 patients, double-blinded with a 2:1 ratio (drug to placebo ratio). Treatment with leronlimab for two weeks Interim analysis will be performed on the data from the first 50 patients following two weeks of leronlimab therapy.	Mortality rate at day 14.	The former study included 10 severely ill patients. Eight of them demonstrated significant improvement after three days in several important immunologic bio-markers (cytokines, IL-6, and a trend toward normalization of the CD4/CD8 ratio) Phase 2 study included 10 and now the company has initiated the phase 2b/3 study.	High

	releases/detail/405/treatment-with-cytodyns-leronlimab-indicates-significant https://apnews.com/Globe%20Newswire/9a363c78ce9b4a8300522870891c012e					
Chloroquine Analog (GNS561), an Anti PD-1 (Nivolumab) and an Anti-interleukine-6 Receptor (Tocilizumab)	NCT04333914	Lyon, Rhône, France	A Prospective, Controlled, Randomized, open label, Multicenter Study to Compare the Efficacy of a Chloroquine Analog (GNS561), an Anti PD-1 (Nivolumab) and an Anti-interleukine-6 Receptor (Tocilizumab) Versus Standard of Care in Patients With Advanced or Metastatic Cancer and SARS-CoV-2 (COVID-19) Infection N=273 devided into two cohorts: COHORT 1 (mild symptoms or asymptomatic): GNS561 vs anti-PD1 vs standard of care (randomization ratio 1:1:1). COHORT 2 (moderate/severe symptoms): GNS561 vs anti-IL6 vs standard of care (randomization ratio 1:1:1).	28-day survival rate	Not yet recruiting; Estimated study completion June 2020	Medium
Interferons						
IFN beta-1a Traumakine Licensed for ARDS	NCT02735707 REMAP-CAP link https://www.remapcap.org . The trial protocol: https://www.remapcap.org/protocol-documents REMAP-CAP: Randomized, Embedded, Multifactorial Adaptive Platform trial for Community-Acquired Pneumonia	USA, Global	Platform trial, adding IFN beta-1a Traumakine to immune-modulatory treatments domaine	Patientst: community-acquired pneumonia, including COVID-19 patients, who require ICU care for the support of organ functions Intervention: IV IFN beta-1a, hydrocortisone treatments, and other study treatment options. Outcome The primary endpoint for all domains will be all-cause mortality at 90 days The REMAP-CAP platform trial as a whole will recruit app. 7000 patients from study sites across Asia-Pacific, Europe and North America excluding US. Cannot find the expected number of patient to receive IFN beta-1a	REMAP-CAP is ongoing IFN beta-1a Traumakine treatment not yet recruiting	High

Interferon Beta 1a SNG001 is an inhaled formulation of interferon-beta-1a Not licensed Sponsor: Synairgen Research Limited	EudraCT: 2020-001023-14	UK, at leading NHS respiratory medicine centres.	Phase 2 Randomised, double-blind, placebo-controlled trial. Pilot phase with 100 COVID-19 patients In total 400 patients Recruitment via WHO webpage.	Change in condition measured using the Ordinal Scale for Clinical Improvement during the dosing period. The Ordinal Scale for Clinical Improvement is a World Health Organisation recommended scale for use in COVID-19 trials.	Ongoing Estimated study completion: Unknown	High
Interferon alfa1beta	NCT04293887	Tongji Hospital, China	Early phase 1 Multi-center, randomised, open, blank-controlled, multi-stage clinical study. N=328 patients with corona pneumonia	Dyspnea, reduced SPO2, respiratory rate	Not yet recruiting; Estimated study completion date: June 30, 2020	Low
Interferon	ChiCTR2000029638 http://www.chictr.org.cn/showproj.aspx?proj=49224	Sichuan, China	Multicenter randomised controlled trial. N=100 patients with moderate to severe covid-19 randomised to nebulization of novel gene recombinant super compound interferon or nebulization of alpha-interferon	Clinical symptoms, blood routine etc.	Recruiting; From2020-02-03 To 2020-08-01	Low
Peginterferon Lambda-1a	NCT04331899	US	Randomised open label study of N=120 outpatients with mild COVID-19. Randomised to Peginterferon Lambda-1a or standard of care	Duration of Viral shedding of SARS-CoV-2	Not yet recruiting; Estimated Primary Completion: May 31, 2021	Low
Cerrokin (recombinant human interferon alpha 1beta)	ChiCTR2000030480 http://www.chictr.org.cn/showproj.aspx?proj=50470	Hubei, China	Randomized, open, blank controlled trial. N=332 with covid-19 randomised to cerrokin or conventional treatment	Incidence of side effects	Recruiting; rom2020-03-03 To 2020-07-03	Low
Recombinant human interferon alpha 1b spray	ChiCTR2000030013 http://www.chictr.org.cn/showproj.aspx?proj=49796	Hubei, China	Preventive study N=450, highly exposed Medical staff treated with interferon (N=300) or nothing	Blood routine examination and chest CT.	Not yet recruiting; From2020-02-20 To 2020-06-30	Low
Novaferon Recominant inteferon	ChiCTR2000029496 http://www.chictr.org.cn/showproj.aspx?proj=48809	Huhan, China	Randomised, open label controlled trial. N=90 with covid-19 randomised to Novaferon, Kaletra, or Novaferon+ Kaletra	Time to negative testing	Recruiting	Low
Inhalation of IFN-κ and TFF2 in treatment of nCo-V-infected patients.	ChiCTR2000030262 http://www.chictr.org.cn/showproj.aspx?proj=50136	Shanghai, China	Clinical study, design not described. Intervention: one day treatment of IFN-κ and TFF2 (n=10) two day treatment of IFN-κ and TFF2 (n=10)	Wide range of primary outcomes: viral load, clinical features, inflammation, pulmonary imaging	Recruiting	Low

			control (n=10)			
rhIFNα nasal drops and thyosin-alfa Sponsor: Shanghai Jiao Tong University School of Medicine	NCT04320238	China, Hubei	Open label non-randomised trial N=2933 medical staff devided into high risk or low risk group. High risk: rhIFNα nasal drops and thyosin-alfa Low risk: rhIFNα nasal drops	new-onset COVID-19	Recruiting Estimated primary completion: May 2020	Low
Other immune modulating drugs						
Pirfenidone (Esbriet) EMA approved for pulmonary fibrosis Sponsor: Huilan Zhang	NCT04282902	Hubei, China Tongji hospital	Phase 3 open label, N=294 with severe or critical covid-19 randomised to Pirfenidone, or standard treatment	Lesion are of chest CT Change in pulse oxygen from baseline	Recruiting; Estimated primary completion date/ Estimated study completion: April 30, 2020/ June 1, 2020	High
Pirfenidone	ChiCTR2000030333 http://www.chictr.org.cn/showproj.aspx?proj=48801 Same study as NCT04282902?		A randomized, open-label controlled trial N=292 with severe or critical covid-19 randomised to pirfenidone 400 mg x 3 (n=147) for 4 weeks or conventional treatment (n=145)	Survey, pulse oxygen, chest CT, blood gas	Recruiting From2020-03-04 To 2020-07-07	High
CD24Fc A non-antiviral immunomodulator. Has completed a phase 2 study for prophylactic treatment of graft-versus-host disease (GVHD) for leukemia patients undergoing hematopoietic stem cell transplantation Sponsor: OncoImmune, Inc.	NCT04317040	United States, Maryland	Phase 3 randomized, Double-blind, Placebo-controlled, Multi-site trial. N=230 with severe covid-19 or NIAID 7-point ordinal score 3 to 4 randomised to CD24Fc, or placebo	Time to improve in clinical status [Time Frame: 14 days]: time required from the start of treatment to the improvement of clinical status "severe" to "moderate/mild"; or improvement from "scale 3 or 4" to "scale 5 or higher" based on NIAID ordinal scales.	Estimated Primary Completion/ Estimated Study Completion: May 2021 /May 2022	High
Anakinra Siltuximab Tocilizumab	NCT04330638 EudraCT: 2020-001500-41	Belgium	Open label, Prospective, Randomized, Factorial Design, Interventional Study N=342 randomised to Anakinra Siltuximab, Siltuximab + Anakinra, Tocilizumab, Tocilizumab + Anakinra, or Standard of care	Time to Clinical Improvement	Not yet recruiting; Estimated Primary Completion: September 2020	Medium

Thymosin Sponsor: Wuhan Jinyintan Hospital (Wuhan Infectious Diseases Hospital)	ChiCTR2000029806 http://www.chictr.org.cn/showproj.aspx?proj=49161	Not stated	N=120 with severe covid-19 and lymphocytopenia randomised to PD-1 (PD-1 and thymosin), thymosin, or conventional treatment	Proportion of patients with a lung injury score reduction of 1-point or more 7 days after randomization	Recruiting; From2020-01-01 To 2021-01-31	Medium
Granulocyte colony-stimulating factor Sponsor: The First Affiliated Hospital of Guangzhou Medical University	ChiCTR2000030007 http://www.chictr.org.cn/showproj.aspx?proj=49619	Guangdong and Hubei, China	Randomised controlled trial, N=200 with mild to severe covid-19 and low white blood cell count and low lymphocyte count	Clinical symptoms	Not yet recruiting; From2020-02-03 To 2020-04-10	Medium
LEUKINE® (sargramostim) A recombinant human granulocyte-macrophage colony stimulating factor (rhu GM-CSF) FDA approved drug. Sponsor: University Hospital Ghent	EudraCT Number: 2020-001254-22 NCT04326920	Belgium	A prospective, randomized, open-label, interventional study N=80 COVID-19 patients with acute hypoxic respiratory failure randomised to Leukine or standard care.	Oxygenation after 5 DAYS through assessment of pretreatment (day 0) and post-treatment (day 5) ratio of PaO2/FiO2 and through measurement of the P(A-a) O2 gradient	Ongoing; Estimated Primary Completion: October 31, 2020	Medium
Baricitinib; Anti-JAK acting against JAK1 and JAK2. Sponsor: Hospital of Prato	NCT04320277	Tuscany, Italy,	Phase 3 study Non-randomised study with historical controls. N=60 allocated to baricitinib. Controls: patients admitted to hospital the previous 2 weeks who were treated with antiviral and/or hydroxychloroquine.	The percentage of ICU admission	Recruiting; Estimated Study Completion: May 30, 2020	Medium
Ruxolitinib (Jakavi) Indicated for the treatment of myelofibrosis and polycythaemia vera	NCT04331665	Canada, Ontario	Single arm study of N=64 patients with COVID-19	Critically illness	Not yet recruiting; Estimated Primary Completion: October 30, 2020	Low
Ruxolitinib (Jakavi)	NCT04334044	Mexico	Single arm study of N=20 aptients with COVID-19	Recovery of Pneumonia [Time Frame: 14 days]	Not yet recruiting; Estimated Primary Completion: June 1, 2020	Low
Tofacitinib (Xeljanz) Approved for rheumatoid and psoriatic arthritis and ulcerative colitis	NCT04332042	Italy	Phase 2, single arm study of N=50 patients with SARS-CoV2 Infection and confirmed interstitial pneumonia	Need of mechanical ventilation	Not yet recruiting; Estimated Primary Completion: June 20, 2020	Low
NK cells	NCT04280224	China, Henan	Phase 1 N=30 with covid19 randomised to NK cells, or Conventional treatment	Improvement of clinical symptoms including duration of fever, and respiratory frequency Adverse reactions	Recruiting; Estimated primary completion date/ Estimated study completion:	Low

					Sep 30, 2020/ Dec 30, 2020	
Umbilical cord blood CIK (cytokine induced killer) and NK (natural killer) cells	ChiCTR2000030329 http://www.chictr.org.cn/showproj.aspx?proj=49779	Shaanxi, China	N=90 patients with mild to moderate covid-19 and poor immune function randomised 1:1:1 to Umbilical cord CIK cells, Umbilical cord NK cells, or Conventional treatment	Status of immune function Time of nucleic acid turns to negative Length of hospital stay	Not yet recruiting From2020-03-01 To 2021-02-17	Low
NK cells, IL15-NK cells, NKG2D CAR-NK cells, ACE2 CAR-NK cells, NKG2D-ACE2 CAR-NK cells	NCT04324996	China	A Phase I/II Study of Universal Off-the-shelf NKG2D-ACE2 CAR-NK Cells N=90 randomised to 5 different treatments of NC-cells	Clinical response Safety and tolerability	Recruiting; Estimated Primary Completion: May 31, 2020	Medium
Type I macrophages therapy	ChiCTR2000029431 http://www.chictr.org.cn/showproj.aspx?proj=48907	Liaoning, China	3 arm intervention study. N=45 patients with covid-19 randomised to Critical Treatment + Ankylosaurus, Critical Treatment + Ankylosaurus+M1 suppression therapy, or Critical Treatment	CT of lung	Recruiting; Study execute time: 2020-01-29 2021-12-31	Low
PD-blocking antibody Sponsor: Southeast University, China	NCT04268537	Not stated	Phase 2 randomised, open label N=120 patients with severe covid19 randomised to PD-1 blocking antibody, Thymosin, or standard treatment	lung injury score [Time Frame: 7 days]	Not recruiting yet; Estimated primary completion date/ Estimated study completion: April 30, 2020/ Oct 31, 2020	Low
PD-1 monoclonal antibody	ChiCTR2000030028 http://www.chictr.org.cn/showproj.aspx?proj=49840	Hubei, China	Prospective comparative study in severe and critical patients with covid-19. N=20: PD-1 mAb N=20: standard treatment	Several primary outcomes.	Not yet recruiting. From2020-02-24 To 2020-08-31	Low
Fingolimod Sponsor: First Affiliated Hospital of Fujian Medical University	NCT04280588	Wan-Jin Chen	Phase 2, not randomised, single arm N=30 with severe covid19	The change of pneumonia severity on X-ray images	Recruiting; Estimated study completion: July 1, 2020	Low
Polyinosinic:polycytidylic acid	ChiCTR2000029776 http://www.chictr.org.cn/showproj.aspx?proj=49342	zhejiang	Open label study N=40, randomised to Polyinosinic:polycytidylic acid or conventional therapy	Time to Clinical recovery	Recruiting; From2020-02-11 To 2020-12-31	Low
Tranilast, novel NLRP Inflammasome inhibitor.	ChiCTR2000030002	Anhui, China	Open label study; N=60 randomised to tranilast or vonventional therapy	Cure rate	Recruiting; From2020-02-15 To 2020-07-30	Low

Used for the prevention of scarring post glaucoma filtration surgery. Has previously been approved in Japan and South Korea for bronchial asthma, keloid and hypertrophic scar.	http://www.chictr.org.cn/showproj.aspx?proj=49738					
Recombinant human Interleukin-2	ChiCTR2000030 http://www.chictr.org.cn/showproj.aspx?proj=49567 167	Hubei, China	Randomised, controlled trial. Blinding not stated. N=80 randomised to Recombinant Human Interleukin-2, or placebo	Fatality rate, and CD8+, CD4+ and NK cells	Not yet recruiting; From2020-03-02 To 2020-09-01	Low
Ruxolitinib + stem cell therapy	ChiCTR2000029580 http://www.chictr.org.cn/showproj.aspx?proj=49088	Tongji hospital, Hubei, China	A prospective, single-blind, randomised controlled trial N=70 High risk patients randomised to Ruxolitinib + stem cell therapy, or Conventional treatment	Safety	Recruiting; From2020-01-31 To 2020-12-31	Low
Jakotinib	ChiCTR2000030170 http://www.chictr.org.cn/showproj.aspx?proj=50017	Shanghai, China	Single arm treatment stratified by severity, N=16	Time to clinical improvement / time to clinical recovery Time window: 28 days	Recruiting; From2020-02-15 To 2020-07-31	Low
Imatinib	EudraCT: 2020-001236-10	Netherlands	a randomized, single-blind, placebo controlled, clinical trial in patients with severe COVID-19 disease. N=304 randomised to imatinib or placebo	Composite outcome of death / need for invasive ventilation / need for ECMO Time frame: 28 days	Ongoing	Medium
Glucocorticoids						
Dexamethasone	NCT04325061	Spain	Multicenter, randomized, controlled, open-label trial involving mechanically ventilated adult patients with ARDS caused by confirmed COVID-19 infection N=200 randomised to dexamethasone or standard intensive care	All-cause mortality at 60 days after enrollment	Not yet recruiting; Estimated primary completion date: October 2020	Medium
Dexamethasone	NCT04327401	Brazil	Open label randomised trial. N=290 participants with Moderate/severe ARDS randomised to dexamethasone or Standard treatment	Ventilator-free days [Time Frame: 28 days after randomization]	Not yet recruiting; Estimated Primary Completion; August 30, 2020	Low
Glucocorticoid	NCT04244591	China, Beijing	Phase 2 and 3: open label, randomised controlled trial	Lower Murray lung injury score (Time Frame: 7 days and 14 days after randomization)	Recruiting; Estimated primary completion date/	Low

			N=80 with severe disease (ICU admission) randomised to methylprednisolone 40 mg x2 for 5 days		Estimated study completion: April 25, 2020/ December 25, 2020	
Methylprednisolone	NCT04263402	Tongji Hospital	Phase 4 open label, Prospective, Randomised Controlled Cohort Study N=100 patients with severe pneumonia randomised to <40 mg methylprednisolone/day, or 40-80 mg/day	1. Rate of disease remission 2. rate and time of entering the critical stage	Not yet recruiting; Estimated study completion: July 1, 2020	Low
Methylprednisolone	NCT04273321	China, Hubei	Open label, randomised trial N=400 patients Randomised to Methylprednisolone 1mg/kg/day ivgtt for 7 days or ?	The incidence of treatment failure in 14 days	Recruiting; Estimated primary completion/estimated study completion: May 1, 2020/may 30, 2020	Low
Methylprednisolone	ChiCTR2000029386 http://www.chictr.org.cn/showproj.aspx?proj=48777 https://www.ncbi.nlm.nih.gov/pubmed/32149773	Chongqing, China	a Randomised Controlled Trial N=40 with severe covid-19 randomised to methylprednisolone or conventional treatment	Mortality 12 weeks, 4 weeks and clinical improvement	Recruiting From 2020-01-29 to 2021-01-29	Low
Corticosteroids	ChiCTR2000029656 http://www.chictr.org.cn/showproj.aspx?proj=49086	Hubei, China	Open label randomised controlled trial. N=100 patients with Covid-19 randomised to methylprednisolone or standard treatment	ECG, chest imaging, complications	Not yet recruiting. From2020-02-14 To 2020-04-14	Low
Corticosteroids	ChiCTR2000030481 http://www.chictr.org.cn/showproj.aspx?proj=50453	Hubei, China	Parallel study, blinding unknown; N=200 corticosteroid therapy timing early timing, medium timing, or conventional treatment	The time of duration of COVID-19 nucleic acid RT-PCR test results of respiratory specimens (such as throat swabs) or blood specimens change to negative.	Recruiting; From2020-03-01 To 2020-04-30	Low
Methylprednisolone	NCT04323592	Italy	Interventional study with historical matched controls. N=104 patients with COVID-19 treated with methylprednisolone or standard of care	Death or ICU admission or Invasive mechanical ventilation [Time Frame: 28 days]	Recruiting; Estimated Primary Completion: May, 2020	Low
Inhaled Steroid + formoterol fumarate (Symbicort)	NCT04331054	Paris, France	Randomised open label study. N=436 hospitalised patients with covid-19 randomised to symbicort or standard of care	Time (in days) to clinical improvement within 30 days after randomization	Not yet recruiting; Estimated Primary Completion: July 2020	Medium

Ciclosonide (inhaled) Ciclosonide + Hydrocychloroquine	NCT04330586	Korea	Open label randomised trial N=141 randomised to Ciclosonide Ciclosonide+Hydrocychloroquine, Standard of care	Rate of SARS-CoV-2 eradication at day 14	Not yet recruiting; Estimated Primary Completion: June 30, 2020	Low
Other anti-inflammatory drugs						
Leflunomide Approved in EU for rheumatoid arthritis and psoriasis arthritis Sponsor: Renmin Hospital of Wuhan University	ChiCTR2000030058 http://www.chictr.org.cn/showproj.aspx?proj=49831	Hubei	Phase 3, multicenter, randomized, double-blind, controlled clinical trial N=200 patients with pneumonia caused by novel coronavirus. randomised to Leflunomide, or placebo	The days from positive to negative for viral nucleic acid testing	Not yet recruiting; From2020-03-01 To 2020-05-30	High
Colchicine	ClinicalTrials.gov Identifier: NCT04328480 The ECLA PHRI COLCOVID Trial (COLCOVID)	Multi-centre, multi-country in South America – Lead Country: Argentina	Randomized, controlled, open-label, 2500 adult patients with suspicion of COVID-19 Drug: Colchicine Comparator: Local standard of care	All-cause mortality [Time Frame: During hospitalization or until death, whichever comes first, assessed up to 30 days] Number of participants who die	Planning, not yet recruiting, estimated completion June 2020	High
Colchicine	ClinicalTrials.gov Identifier: NCT04322682 Colchicine Coronavirus SARS-CoV2 Trial (COLCORONA) (COVID-19)	Canada, Presumably multi-centre, lead centre: Montreal Heart Institute, Montreal, Quebec, Canada	A randomized, double-blind, placebo-controlled, multi-center study N=6000 non-hospitalised high risk patients diagnosed with COVID-19 infection within the last 24 hours randomised to cholchicine or placebo on top of standard of care.	Composite of death or the need for hospitalization due to COVID-19 infection in the first 30 days after randomization	Recruiting, estimated completion September 2020	High
Colchicine	ClinicalTrials.gov Identifier: NCT04322565 Colchicine Efficacy in COVID-19 Pneumonia	Italy	Randomized, controlled, open-label, 100 patients with Crisk stratification criteria of the Emilia-Romagna Region, Italy OVID-19,	Clinical improvement [Time Frame: Day 28] Time to clinical improvement: defined as time from randomization to an improvement of two points from the status at randomization on a seven-category ordinary scale Hospital discharge [Time Frame: Day 28] Live discharge from the hospital (whatever comes first)	Planning, not yet recruiting, estimated completion June 2020	Medium

Colchicine	ClinicalTrials.gov Identifier: NCT04326790 The GReek Study in the Effects of Colchicine in Covid-19 (GRECCO-19) 2020-001455-40	Greece	Cluster randomization, 180 participants with COVID-19 Drug: Colchicine Comparator: Standard treatment	CRP increase to 3 x upper limit of normal [Time Frame: 3 weeks] Time to increase in C-reactive protein to 3 times the ULN Clinical deterioration in the semiquantitative ordinal scale suggested by the WHO R&D committee [Time Frame: 3 weeks] Time to clinical deterioration (2 levels in the WHO R&D Blueprint scale)	Planning, not yet recruiting, estimated completion September 2020	Medium
Naproxen	NCT04325633	France	Open label randomisesd controlled trial. N=584 critically COVID-19 patients randomized to Naproxen +lansoprazole or standard care	Mortality all causes at day30	Not yet recruiting; Estimated primary completion: April, 2021	Medium
Ibuprofen	NCT04334629	Not stated	Randomised, double-blinded trial N=230 hospitalised patients with COVID-19 and acute hypoxemic respiratory failure	Worsening respiratory failure; defined using severity of hypoxaemia using [PaO2/FiO2 ratio OR SpO2/FiO2 ratio]	Not yet recruiting; Estimated Primary Completion: August 5, 2020	Low
Piclidenoson (CF101) Mechanism of action is A3AR mediated and includes modulation of key signaling proteins, such as PI3K, PKA, PKB/Akt, IKK and NF-kB, resulting in de-regulation of the Wnt/β-catenin pathway and inhibition of inflammatory cytokine production	NCT04333472	Israel	Open label randomized trial. N=40 hospitalised patients with COVID-19 randomised to Piclidenoson or standard of care	Duration of viral shedding in days [Time Frame: 28 days] Time to clinical recovery (TTCR) in days [Time Frame: 28 days] Treatment-emergent adverse events (AEs) [Time Frame: 28 days]	Not yet recruiting; Estimated Primary Completion: June 6, 2020	Low
Stem cell therapy						
Stem cell therapy Sponsor: Beijing 302 Hospital	NCT04288102	Hubei, China	Phase 2 Prospective, double-blind, multicentre, randomised trial N=60 severe Covid-19 patients randomised 2:1 to 3 intravenous doses of mesenchymal stem cells (MSCs) or placebo (saline).	Improvement time of clinical critical treatment index within 28 days Side effects in the MSCs treatment group	Recruiting; Estimated primary completion date/ Estimated study completion:	High

					August 31, 2020/December 31, 2020	
NK stem cells CYNK-001 Company: Celularity (spinout from Celgene)	Early news: FDA IND approval https://www.forbes.com/sites/alexknapp/2020/04/02/fda-gives-green-light-to-test-a-treatment-against-covid-19-coronavirus-that-flattens-the-curve-in-patients/	USA	Phase I/II clinical study N=86 COVID-19 infected adults	TBD Test the efficacy of CYNK-001 immunotherapy	Not recruiting; Estimated study completion: Unknown	High
Umbilical Cord-derived Mesenchymal Stromal Cells Sponsor: Assistance Publique - Hôpitaux de Paris	NCT04333368	France	Double-blinded, randomised trial. N=60 patients with ARDS randomised to MSC or placebo	Respiratory efficacy evaluated by the increase in PaO2/FiO2 ratio from baseline to day 7	Estimated Primary Completion; June 30, 2020	High
Human Umbilical Cord Mesenchymal Stem Cells (UC-MSCs) therapy Sponsors: Puren Hospital Affiliated to Wuhan University of Science and Technology	NCT04293692	China, Hubei	Triple blinded randomised controlled trial. N=48 with moderate - severe covid19 randomised to UC-MSCs or placebo	Size of lesion area by chest imaging	Recruiting; Estimated primary completion date/ Estimated study completion: May 1 2020/Feb 1, 2021	Medium
Human Mesenchymal Stem Cells Sponsor: Chinese PLA General Hospital	ChiCTR2000030138 http://www.chictr.org.cn/showproj.aspx?proj=50004	Hainan, China	Phase 2; Randomised, double blind, placebo controlled trial N=60 randomised to human umbilical cord mesenchymal stem cells (UC-MSC), or placebo	Clinical index	Not yet recruiting; From2020-02-24 To 2020-05-31	Medium
Stem cells Human Embryonic Stem Cells Derived M Cells (CAStem)	NCT04331613	Beijing, China	Phase 1/2 clinical study. Single arm study. N=9 with COVID-19 Dose escalation study with 3 cohort with 3 patients in each cohort.	Adverse reaction (AE) and severe adverse reaction (SAE); Changes of lung imaging examinations	Recruiting; Estimated Primary Completion: December 2020	Low
Stem cell therapy	NCT04252118	China	Phase 1 Open label, non-randomised intervention study N=20 patients with covid19 Treatment: N=10 treated with MSN	Size of lesion area by chest radiograph or CT (time frame day 28) Side effects day (time frame day 180)	Recruiting; Estimated primary completion date/ Estimated study completion:	Low

			N=10 treated with conventional treatment		Dec 2020/December, 2021	
Stem cell therapy; Allogenic Adipose Mesenchymal Stem Cells	NCT04276987	China	Phase 1, open label pilot study N=30 with severe covid19, Single group assignment	Adverse reactions Time to clinical improvement (28 days)	Not yet recruiting; Estimated study completion: July 31, 2020	Low
Stem cell therapy; Umbilical cord mesenchymal stem cells. Sponsor: Wuhan Union Hospital, China	NCT04273646	China, Hubei	Open label, randomised study N=48 with severe covid19; Randomised to stem cell therapy or placebo	Pneumonia severity index week 0-week 12. Oxygenation index	Not yet recruiting; Estimated primary completion / Estimated study completion: June 30 2020/Feb 15, 2022	Low
umbilical cord mesenchymal stem cell	ChiCTR2000029569 http://www.chictr.org.cn/showproj.aspx?proj=49062	China, Hubei	Open label N=30 with severe and critical covid-19 randomised to Stem cell or conventional treatment	PSI	Not recruiting From2020-02-05 To 2021-04-30	Low
umbilical cord blood mononuclear cells	ChiCTR2000029572 http://www.chictr.org.cn/showproj.aspx?proj=41760	China, Hubei	Open label N=30 with severe covid 19 randomised to Stem cell or conventional treatment	PSI	Not recruiting From2020-02-05 To 2021-04-30	Low
Stem cell therapy; Umbilical cord- derived mesenchymal stem cells Sponsor: ZhiYong Peng	NCT04269525	China, Hubei	Phase 2, open label N=10, serious or critical covid19	Oxygenation index day 14	Recruiting; Estimated primary completion / Estimated study completion: April 30, 2020/Sept 30, 2020	Low
Human Menstrual Blood-Derived Stem Cells	ChiCTR2000029606 http://www.chictr.org.cn/showproj.aspx?proj=49146	Zhejiang, China	Open label, 5 arm study. Critically ill patients treated with stem cells, conventional treatment, artificial liver therapy, artificial liver therapy + stem cells, or Conventional treatment	Mortality	Recruiting; From2020-01-15 To 2022-12-31	Low
Umbilical cord mononuclear cells	ChiCTR2000029812 http://www.chictr.org.cn/showproj.aspx?proj=49374	Guangdong, China	Open label, N= 60 patients with Covid 19 randomised to umbilical cord blood mononuclear cells or conventional treatment	Time to disease recovery	Not recruiting ; From2020-02-20 To 2021-02-20	Low

Cord Blood Mesenchymal Stem Cells	ChiCTR2000029816 http://www.chictr.org.cn/showproj.aspx?proj=49389	Guangdong, China	Open label, N= 60 patients with Covid 19 randomised to Cord Blood Mesenchymal Stem Cells or conventional treatment	Time to disease recovery;	Not recruiting ; From2020-02-20 To 2021-02-20	Low
Cord Blood NK Cells Combined with Cord Blood Mesenchymal Stem Cells	ChiCTR2000029817 http://www.chictr.org.cn/showproj.aspx?proj=49384	Guangdong, china	Open label, N= 60 patients with Covid 19 randomised to High dose NK cells, and mesenchymal stem cells, Conventional dose NK cells and mesenchymal stem cells, or Preventive dose NK cells and mesenchymal stem cells.	Time to disease recovery;	Not recruiting ; From2020-02-20 To 2021-02-20	Low
Cord Blood NK Cells Combined with Cord Blood Mesenchymal Stem Cells	ChiCTR2000029818 http://www.chictr.org.cn/showproj.aspx?proj=49382	Guangdong, china	Open label, N= 60 patients with Covid 19 randomised to High dose NK cells, and mesenchymal stem cells, Conventional dose NK cells and mesenchymal stem cells, or Preventive dose NK cells and mesenchymal stem cells.	Time to disease recovery;	Not recruiting ; From2020-02-20 To 2021-02-20	Low
mesenchymal stem cells	ChiCTR2000029990 http://www.chictr.org.cn/showproj.aspx?proj=49674	Beijing, Hubei, Shanghai	Phase 1-2; N=120, Severe covid-19 randomised to mesenchymal stem cells or saline	Improved respiratory system function (blood oxygen saturation) recovery time;	Recruiting; From2020-01-30 To 2020-03-31	Low
Umbilical cord Wharton's Jelly derived mesenchymal stem cells	ChiCTR2000030088 http://www.chictr.org.cn/showproj.aspx?proj=49902	Beijing, China	Type of study not stated. Blinding not stated N= 40 with critical covid-19 Treatment: stem cells (n=20) 40 ml saline (n=20)	The nucleic acid of the novel coronavirus is negative CT scan of ground glass shadow disappeared	Not yet recruiting; From2020-03-01 To 2021-12-31	Low
Wharton's Jelly Mesenchymal stem cells Sponsor: Stem Cells Arabia	NCT04313322	Jordan	Phase 1, single arm study N=5 with COVID-19	Improvement of clinical symptoms; Adverse events; Viral RNA	Recruiting. Estimated study completion: Sept, 2020	Low
Human umbilical cord mesenchymal stem cells	ChiCTR2000030116; http://www.chictr.org.cn/showproj.aspx?proj=49901	Jiangxi, China	N=16 with critical covid-19; Different stem cell doses	Time to leave ventilator on day 28 after receiving MSCs infusion	Recruiting; From2020-02-01 To 2020-08-31	Low
Mesenchymal stem cells	ChiCTR2000030224 http://www.chictr.org.cn/showproj.aspx?proj=49968	Hubei, China	Clinical study, open label Severe or critical covid-19 patients; N=32 stratified severity and randomised to stem cells or injection with saline	Several primary endpoints – not specified	Not yet recruiting; From2020-02-14 To 2020-05-31	Low

Umbilical cord mesenchymal stem cells	ChiCTR2000030300 http://www.chictr.org.cn/showproj.aspx?proj=50022	Jiangsu, China	A single-centre, single arm, prospective, open clinical study N=9	Time to disease recovery; Exacerbation (transfer to RICU) time	Recruiting; From2020-02-19 To 2021-02-20	Low
Stem cell educator therapy	NCT04299152	?	This is a prospective, two-arm, partially masked, single center clinical study . N=20 patients with SARS-CoV-2 undergoing either stem cell therapy or conventional treatment	Number of Covid-19 patients who were unable to complete SCE Therapy [Time Frame: 4 weeks]	Not yet recruiting; Estimated study completion: Nov 2020	Low
Dental pulp mesenchymal stem cells	NCT04302519	?	Early phase 1, single arm study N=24 patients with severe covid-19 assigned to stem cell therapy	Disppear time of ground-glass shadow in the lungs [Time Frame: 14 days]	Not yet recruiting, Estimated study completion: July 2021	Low
NestCell® Mesenchymal Stem Cell Sponsor: Azidus Brasil	NCT04315987	Not stated	Phase 1 /2 study N=24 patients	Disappear time of ground-glass shadow in the lungs	Not yet recruiting. Estimated study completion: June, 2020	Low
Cardiovascular drugs						
ACE-2 Recombinant human angiotensin-converting enzyme 2 Sponsor: APEIRON Respiratory Therapies GmbH	EudraCT: 2020-001172-15 NCT04335136 APN01-01-COVID19	Multi-country Europe, lead country: Denmark	Phase 2 study Double-blinded, randomised, placebo-controlled trial. N= 200 Hospitalised Severe Covid-19 patients randomised to rhACE2 or placebo	Primary Outcome Measures : Cause of death or invasive mechanical ventilation [Time Frame: 28 days] The primary endpoint is a composite endpoint of all cause-death or invasive mechanical ventilation up to 28 days or hospital discharge	Not yet recruiting; Estimated Primary Completion; September 2020	High
ACE-2 Recombinant human angiotensin-converting enzyme 2 Mechanism of action: Recombinant human angotensin-converting enzyme 2 (rhACE2) as a treatment for patients with COVID-19 to block viral entry and decrease viral replication	NCT04287686	China, Guangdong	Pilot study to decide whether to continue with phase 2B trial N=24 patients with positive SARS-CoV-2 or homolog to covid19 randomised to rhACE2 or placebo	Body temperature and viral load	Not yet recruiting; Estimated study completion: April 2020	Low
ARB or ACE inhibitor	ChiCTR2000030453 http://www.chictr.org.cn/showproj.aspx?proj=50381	Zhejiang, China	Single arm study N=100 treated with angiotensin receptor blocker /angiotensin converting enzyme inhibitor	ratio of severe cases	Not yet recruiting; No estimated end-date	Low

Losartan Sponsor: University of Minnesota	NCT04312009	Minneapolis, Minnesota, United States	Randomized Controlled Trial, double blinded. N=200 hospitalised patients with COVID-19 randomised to Losartan 25 mg daily or	Sequential Organ Failure Assessment (SOFA) Respiratory Score [Time Frame: 28 days]	Not yet recruiting Estimated study completion. April 1, 2021	High
Losartan Sponsor: University of Minnesota	NCT04311177	Minneapolis, Minnesota, United States	Randomized Controlled Trial, double blinded. N=516 patients with COVID-19 not requiring hospitalisation randomised to Losartan 25 mg daily or placebo	Hospital Admission [Time Frame: 28 days]	Not yet recruiting Estimated study completion. April 1, 2021	High
ACE inhibitor, angiotensin receptor blocker, calcium channel blocker, thiazide	NCT04330300	Ireland	Randomised open label study. N= 2414 Patients with hypertension treated with ACE-inhibitor or ARB and who are COVID-19 naïve randomised to continue with ACEi /ARB, or Change to thiazide or CCB	Number of Covid-19 positive participants who die, require intubation in ICU, or require hospitalization for non-invasive ventilation (NIV) [Time Frame: 12 months]	Not yet recruiting; Estimated Primary Completion: January 31, 2021	High
Valsartan	NCT04335786 PRAETORIAN-COVID	Netherlands	A Double-blind, Placebo-controlled Randomized Clinical Trial N=651 patients hospitalised with COVID-19 randomised to valsartan or placebo	first occurrence of intensive care unit admission, mechanical ventilation or death [Time Frame: within 14 days]	Estimated Primary Completion: July 2020	High
ARB or ACE inhibitor Sponsor: Neuromed IRCCS	NCT04318418	IRCCS Neuromed, Department of Epidemiology and Prevention, Pozzilli, Italy	Observational case control study N=5000	Severe COVID-19	Estimated Primary Completion: April 2020	Medium
Losartan	NCT04335123	United States, Kansas	Single arm study N=50 patients with COVID-19	Number of participants with treatment-related adverse events as assessed by protocol definition of AE	Recruiting; Estimated Primary Completion Date : Se ptember 2020	Low
Angiotensin 1-7	NCT04332666 ATCO Trial	Belgium	Randomized, controlled, investigator initiated, phase II/phase III, single blinded, interventional trial N=60 patients with COVID-19 at ICU department randomised to angiotensin (1-7) or placebo	Composite outcome of mortality and necessity of mechanical ventilation	Not yet recruiting Estimated Primary Completion; May 30, 2020	Medium
Other						
Chloroquine or hydroxy-chloroquine; Antimalarial agent, heme polymerase inhibitor;						

Malaria prophylaxis and treatment						
Chloroquin and Hydroxychloroquin	Early news: https://www.sciencemag.org/news/2020/03/who-launches-global-megatrial-four-most-promising-coronavirus-treatments WHO Solidarity and Discovery NCT04315948 Norway: 2020-000982-18	EU: France, Spain, UK, Germany, Belgium, Netherlands, Luxembourg, Norway N=3200 ROW: Argentina, Bahrain, Canada, Iran, South Africa, Switzerland and Thailand More countries are expected to join	Adaptive, randomised open clinical trial to one of 4 treatments (not Chloroquin in EU)	Subject clinical status (on a 7-point ordinal scale) on Day 15	Recruiting; Estimated study completion: March 2023	High
Hydroxychloroquine Sponsor: Washington University School of Medicine	NCT04333732 CROWN CORONATION	Several countries involved: United States, Australia, Ireland, Canada, South Africa, UK	A Phase 2, International Multi-site, Bayesian Adaptive, Randomised, Double-blinded, Placebo-controlled Trial Assessing the Effectiveness of Varied Doses of Oral Chloroquine in Preventing or Reducing the Severity of COVID-19 Disease in Healthcare Workers N=55000 randomised to Low-dose (300mg chloroquine base weekly); Medium-dose (300mg chloroquine base twice weekly); High-dose (150 mg chloroquine base daily); Placebo.	Symptomatic COVID-19 [Time Frame: 3 months]	Not yet recruiting; Estimated Primary Completion: February 2021	High
Hydroxychloroquine Sponsor: National Institute of Respiratory Diseases, Mexico	NCT04315896 Hydra trial	Mexico	Randomised double blinded placebo controlled trial N= 500 severe covid-19 patients randomised to hydroxychloroquine, or placebo	All-cause hospital mortality, time frame day 120	Not yet recruiting; Estimated Primary Completion: October 31, 2020	High

Hydroxychloroquine Sponsor: National Institute of Respiratory Diseases, Mexico	NCT04318015 PHYDRA trial	Mexico	Prevention trial Randomised double blinded placebo controlled trial, stratified by risk. N= 400 Healthcare personnel exposed to patients with COVID-19 randomised to hydroxychloroquine, or placebo	Symptomatic COVID-19 infection rate	Not yet recruiting; Estimated Primary Completion: December 31, 2020	High
Hydroxychloroquine Sponsor: Columbia University	NCT04318444	New York	Post Exposure Prophylaxis for Household Contacts of COVID-19 Patients: A NYC Community-Based Randomized Clinical Trial, double-blinded N=1600 household contacts	Number of participants with symptomatic, lab-confirmed COVID-19.	Not yet recruiting; Estimated Primary Completion: March 2021	High
Chloroquine, Sponsor: University of Oxford	NCT04303507	?	A Randomised, Placebo-controlled Prophylaxis Study (COPCOV) N=10000 Participant works in healthcare facility or other well characterised high-risk environment, OR is an inpatient or relative of a patient in a participating hospital and likely exposed to COVID-19 infection or another high-risk group Loading dose of 10 mg/kg, followed by 150 mg daily for 3 months	Number of symptomatic COVID-19 infections [Time Frame: Approximately 100 days]	Not yet recruiting; Estimated completion date: May 2022	High
Hydroxychloroquine Sponsor: University of Minnesota	NCT04308668	Minneapolis, Minnesota, United States New York, New York, United States	Post-exposure Prophylaxis. A Pragmatic Randomized Clinical Trial Quadruple blinded. N=1500 exposed to a COVID19 case within 3 days as either a healthcare worker or household contact randomised to hydroxychloroquine or placebo	Incidence of COVID19 Disease [Time Frame: 14 days] Ordinal Scale of COVID19 Disease Severity [Time Frame: 14 days]	Recruiting. Estimated Study Completion: May 2021	High
Hydroxychloroquine	EudraCT: 2020-001224-33	Germany	Randomised, double-blinded, placebo-controlled trial N=220 patients with COVID-19 randomised to Hydroxychloroquine or placebo	Viral clearance measured in throat swabs. Interim analysis: will be done when 40% of events have accrued. In case the interim analysis shows a HR > 1.93 (nominal p < 0.0018), efficacy is shown and the trial may be stopped.	Ongoing	High
Chloroquine diphosphate; Comparing two doses	NCT04323527	Brazil	Double-blind, Randomized Adaptive Clinical Trial N=440 hospitalised COVID-19 patients randomised to high versus low dose chloroquine diphosphate; High dose: 600 mg bid for 10 days.	Absolute mortality at day 28	Recruiting; Estimated Primary Completion: August 31, 2020	High

			Low dose: 450 mg bid on D1, 450 once daily from D2 to D5, and placebo D6-D10			
Hydroxychloroquine + Azithromycin	NCT04322396	Denmark	A Randomized, Placebo-controlled Double-blinded Trial Evaluating Treatment With Azithromycin and Hydroxychloroquine to Patients With COVID-19 N= 226 patients with positive COVID-19 test/diagnosis during the hospitalization randomised to Azithromycin and Hydroxychloroquine or placebo	Number of days alive and discharged from hospital within 14 days	Not yet recruiting; Estimated Primary Completion: October 31, 2020	High
Hydroxychloroquine	NCT04325893	France	a Prospective, Multicentre, Randomised, Double-blind Study N=1300 randomised to hydroxychloroquine or placebo	Death, regardless of cause, or the use of intubation and invasive ventilation in the 14 days following inclusion and the start of treatment	Estimated Primary Completion: September 2020	High
Hydroxychloroquine	NCT04328467	United States, Minnesota	Pre-exposure Prophylaxis for SARS-Coronavirus-2 N=3500 healthcare workers at high risk for COVID-19 exposure randomised to 3 arms: hydroxychloroquine 400 mg once weekly hydroxychloroquine 400 mg twice weekly or placebo	COVID-19-free survival [Time Frame: up to 12 weeks]	Estimated Primary Completion: August 2020	High
Hydroxychloroquine	NCT04328285	France, angers, Paris, Saint Etienne	A 2-step randomized double-blind placebo-controlled clinical trial. N=600 health care workers randomised to Lopinavir and ritonavir or placebo Second step concerns a trial with lopinavir+ritonavir, see above	Occurrence of an symptomatic or asymptomatic SARS-CoV-2 infection among healthcare workers [Time Frame: Up to 2.5 months]	Not yet recruiting; Estimated Primary Completion: November 30, 2020	High
Hydroxychloroquine	NCT04329923	United States, Pennsylvania	There are 3 cohorts. All participants in of each the cohorts are randomized to one of two arms. Cohorts 1 and 3 are double-blind placebo control cohorts. Cohort 2 is an open label randomized study. Cohort 1 (COVID-19 PCR+ patients quarantined at home): HCQ 400 mg x 2 vs placebo Cohort 2 (Hospitalized COVID-19 PCR+ patients): HCQ 600 mg x 2 vs HCQ 600 mg x 1	Cohort 1: Median release from quarantine time [Time Frame: 14 days or less] Cohort 2: Rate of hospital discharge [Time Frame: 14 days] Cohort 3: Rate of infection [Time Frame: 2 months]	Estimated Primary Completion: April 1, 2021	High

			Cohort 3 (Health care workers at high risk of contracting COVID-19): HCQ 600 mg x 1 vs placebo			
Hydroxychloroquine	NCT04329611	Canada, Alberta	A Randomized, Double-blind, Placebo-controlled Trial N=1660 subjects with COVID-19 (clinical status not stated) randOmised to HCQ or placebo	Composite of hospitalization, invasive mechanical ventilation or death within 30 days	Not yet recruiting; Estimated Primary Completion; July 31, 2020	High
Hydroxychloroquine	NCT04331834	Barcelona, Spain	Pre-Exposure Prophylaxis; Randomised, double-blinded controlled trial. N=440 High-Risk Healthcare Workers	Confirmed cases of a COVID-19	Not yet recruiting; Estimated Primary Completion; October 3, 2020	High
Hydroxychloroquine Sponsor: Sanofi	NCT04333654	United States, Massachusetts, US	A Phase 1b, Randomized, Double-blinded, Placebo-controlled Study of Hydroxychloroquine in Outpatient Adults With COVID-19 N=210	Viral load assessed by PCR from a nasopharyngeal swab	Recruiting; Estimated Primary Completion; May, 2020	High
Hydroxychloroquine	NCT04332991 (ORCHID)	More than 40 locations in US	Multicenter, blinded, placebo-controlled, randomized clinical trial with COVID-19 N=510 randomised to hydroxychloroquine or placebo	COVID Ordinal Outcomes Scale (7 step) on Day 15 [Time Frame: assessed on study day 15	Recruiting; Estimated Primary Completion: April 2021	High
Hydroxychloroquine sulphate	ISRCTN86534580 https://doi.org/10.1186/ISRCTN86534580 Platform Randomised trial of INterventions against COVID-19 In older people (PRINCIPLE) NB. The ISRCTN registry is a primary clinical trial registry recognised by WHO and ICMJE that accepts all clinical research studies (whether proposed, ongoing or completed), providing content validation and curation and the unique identification number necessary for publication.	UK multi-centre, GP practices, sponsored by Office of the Chief Medical Officer (Government), led by Oxford University (Different study from NCT04303507)	RCT Part of a Platform trial: suspected coronavirus infection in people aged 50 years and above with pre-existing conditions and those aged 65 years and above Drug: Hydroxychloroquine Comparator is usual care.	Primary outcome measure The need for hospital admission or death, for patients aged ≥50 years with comorbidity, and aged ≥65 with or without comorbidity and suspected COVID-19 infection during time of prevalent COVID-19 infections, measured by hospital admission or mortality related to suspected COVID-19 within 28 days	Recruiting Overall trial start date 12/03/2020 Overall trial end date 24/03/2021	Medium

Hydroxychloroquine + azithromycin	NCT04335552	United States, North Carolina	a phase II, randomized, open-label, incomplete factorial with nested randomization clinical trial N=500 hospitalised patieNts with COVID-19 randomised to Standard of care alone Standard of care plus hydroxychloroquine Standard of care plus azithromycin Standard of care plus hydroxychloroquine plus azithromycin	World Health Organization (WHO) ordinal scale measured at 14 days after enrollment	Not yet recruiting; Estimated Primary Completion Date : August 1, 2020	Medium
Hydroxychloroquine	2020-001270-29	3 EU memberstates CZ (Ongoing) GB (Ongoing) FR (Ongoing)	An adaptive Phase 2/3, randomized, open-label study assessing efficacy and safety of hydroxychloroquine for hospitalized patients with moderate to severe COVID-19 N=350 randomised to hydroxychloroquine or standard of care	Phase 2: Change in SpO2/FiO2 ratio from baseline to Day 15. Phase 3 (may be reassessed after review of phase 2): Change in SpO2/FiO2 ratio from baseline to Day 15	Ongoing	Medium
Chloroquine	NCT04333628	Israel	A Two Staged, Multicenter, Open Label and Randomized Trial N= 210 participantsrandomised to Chloroquine regular dose Chloroquine low dose placebo	change in the extent and duration of virus shedding; change in the number of patients going from asymptomatic to moderately disease	Not yet recruiting; Estimated Primary Completion: April 2021	Medium
Hydroxychloroquine vs Azithromycin	NCT04329832	United States, Utah	A prospective Pragmatic randomised Trial. N=300 hospitalised patients with COVID-19 randomised to Hydroxychloroquine vs Azithromycin	COVID Ordinal Outcomes Scale at 14 days [Time Frame: Assessed once on day 14 after enrollment]	Not yet recruiting; Estimated Primary Completion: December 31, 2020	Medium
Hydroxychloroquine	NCT04330144	South korea	Post exposure prophylaxis. Open label randomised controlled trial. N=2486 participants exposed to SARS-CoV-2 Randomised to Hydroxychloroquine or quarantine	The rate of COVID-19	Not yet recruiting; Estimated Primary Completion: March 30, 2021	Medium
Hydroxychloroquine	NCT04330495	Spain	Randomized, Controlled, Double-blind Clinical Trial in patients with inflammatory disease Under Biological Treatment and / or JAK Inhibitors N=800 randomised to Hydroxychloroquine or placebo	Incidence rate and prevalence of COVID-19 cases in both arms; Mortality rate; Intensive Care Unit admissions;	Not yet recruiting; Estimated Primary completion: November 6, 2020	Medium
Hydroxychloroquine + Azithromycin	NCT04328272	Pakistan	Open label randomised, placebo-controlled trial. N= 75 patients with Mild to severe COVID-19 randomised to Hydroxychloroquine,	National Early Warning Score equal to zero [Time Frame: 3-5 Days]	Not yet recruiting; Estimated Primary Completion; May 28, 2020	Medium

			Hydroxychloroquine + Azithromycin, or placebo			
Hydroxychloroquine + Azithromycin Sponsor: Population Health Research Institute	NCT04324463	Ontario, Canada	Open-label, parallel group randomized controlled trial N=1500 patients with COVID-19 randomised to Hydroxychloroquine + Azithromycin or standard of care	Hospital Admission or Death	Not yet recruiting: Estimated Primary Completion: September 30, 2020	Medium
Hydroxychloroquine Sulfate	NCT04316377	University Hospital, Akershus, Norwey	An Open Label Randomized Controlled Pragmatic Trial N=202 hospitalised patients with moderate to severe covid-19 randomised to hydroxychloroquine, or placebo	Rate of decline in SARS-CoV-2 viral load [Time Frame: Baseline (at randomization) and at 96 hours]	Not yet recruiting; Estimated Primary Completion: April 1, 2021	Medium
Hydroxychloroquine + azithromycin Sponsor: Hospital Israelita Albert Einstein	NCT04321278	Brazil, multicentres	Open label randomised controlled trial . N=440 COVID-19 patients who require oxygenation and/or ventilation randomised to Hydroxychloroquine + azithromycin, or Hydroxychloroquine	Clinical status o a 7-point scale [Time Frame: 15 days after randomization]	Recruiting; Estimated Primary Completion: August 30, 2020	Medium
Phosphoric Chloroquine Sponsor: Jingzhou Central Hospital	ChiCTR2000029826 http://www.chictr.org.cn/showproj.aspx?proj=49481	Hubei, China	Randomised double blinded trial. Serious or critically ill patients randomised to chloroquine (n=30) or placebo (n=15)	Mortality rate	Not yet recruiting. From2020-02-17 To 2020-03-17	Medium
Chloroquine Sponsor: Jingzhou Central Hospital	ChiCTR2000029837 http://www.chictr.org.cn/showproj.aspx?proj=49495	Hubei, China	A randomised, double-blind, parallel, controlled trial Mild or moderate covid19 Randomised to hydroxychloroquine (n=80) or Placebo (n=40)	Time of conversion to be negative of novel coronavirus nucleic acid	Not yet recruiting; From2020-02-17 To 2020-03-17	Medium
Phosphoric chloroquine The Sixth Affiliated Hospital of Guangzhou Medical University (Qingyuan People's Hospital)	ChiCTR2000030031; http://www.chictr.org.cn/showproj.aspx?proj=49806	Guangdong, China	A randomised, double-blind, parallel, controlled trial N=120 patients with mild and moderate covid-19 randomised to phosphoric chloroquine (n=80) or placebo (n=40)	Time of conversion to be negative of novel coronavirus nucleic acid	Recruiting; From2020-02-20 To 2021-03-20	Medium
Hydroxychloroquine Non-commercial	2020-000890-25 https://www.clinicaltrialsregister.eu/ctr-search/trial/2020-000890-25/FR#B	France	Single arm? Patients with documented respiratory infection with coronavirus SARS COV 2 N=25	Results of SARS-COV2 virus detection (Day 1, Day 4, Day 7 and Day 14)	last visit of the last participant.	Medium

Hydroxychloroquine Sponsor: Rambam Health Care Campus	NCT04323631	Israel	Open label randomised trial. N= 1116 patients with mild to moderate COVID-19	Number patients developing severe infection or death	Not yet recruiting; Estimated Primary Completion: December 2020	Medium
Hydroxychloroquine + azithromycin	NCT04322123	Brazil	An Open-label, Randomized Controlled Trial. N=630 hospitalised patients with COVID-19 randomised to Hydroxychloroquine + azithromycin Hydroxychloroquine, or standard care	Clinical status of patients on the 15th day after randomization defined by the Ordinal Scale of 6 points.	Not yet recruiting; Estimated Primary Completion: August 2020	Medium
Hydroxychloroquine vs Ascorbic Acid	NCT04328961	New York and Washington	Post-expossure prophylaxis.Single blinded randomised controlled trial. N=2000 Adults Exposed to Coronavirus Disease randomised to Hydroxychloroquine vs Ascorbic Acid	Polymerase chain reaction (PCR) confirmed SARS-CoV-2 infection day 14 and day 28	Not yet recruiting; Estimated Primary Completion; September 30, 2020	Medium
Hydroxychloroquine Sponsor: Wroclaw Medical University	NCT04331600 QUARANTINE2020	Not stated	Multicenter, Randomized, Open-label trial. N=400 ambulatory patients with COVID-19 randomised to hydroxychloroquine + telemedicine, or telemedicine	COVID-19-related hospitalization or all-cause death [Time Frame: 15 days]	Not yet recruiting; Estimated Primary Completion: September 30, 2020	Medium
Hydroxychloroquine	NCT04333225	United States, Texas	Randomised, open label trial. N=360 health care workers exposed to SARS-CoV-2 randomised to hydroxychloroquine or no treatment	Rate of COVID-19 positive conversion on weekly nasopharyngeal (NP) sampling	Recruiting; Estimated Primary Completion: July 30, 2020	Low
Hydroxychloroquine + Azithromycin	NCT04329572	Brazil	Open, Multicentric, Non Randomized, Exploratory Clinical Trial Single group assignment. Hospitalised patients will be treated with HCQ and Azithromycin	Evolution of acute respiratory syndrome, oxygen saturation hemodynamic stability [Time Frame: 28 days]	Not yet recruiting; Estimated Primary Completion: May 31, 2020	Low
Chloroquine phosphate	NCT04328493	Hanoi, and Ho Chi Minh City, Vietnam	A Multi Center Randomized Open Label Trial N=250 hospitalised patients with COVID-19 stratified by study site and severety of illness randomised to chloroquine or standard care	Viral clearance time [Time Frame: Up to 56 days post randomization]	Estimated Primary Completion: April 1, 2021	Low
Chloroquine vs liponavir/ritonavir	ChiCTR2000029609 http://www.chictr.org.cn/showproj.aspx?proj=49145	Guangdong, China	A prospective, open-label, multiple-center study or patients with Covid-19 stratified by severity. Mild symptoms randomised to chloroquine phosphate (n=59) lopinavir/ritonavir (59), or Chloroquine + lopinavir/ritonavir (59)	Primary Outcome(s) virus nucleic acid negative-transforming time;	From2020-02-10 To 2020-12-31	Low

			Severe symptoms randomised to Chloroquine phosphate (n=14) or lopinavir/ritonavir (n=14)			
Chloroquine and lopinavir/ritonavir	ChiCTR2000029741 http://www.chictr.org.cn/showproj.aspx?proj=49263	Guangdong, China	Open label study N=112 cases with Confirmed Covid-19 randomised to Chloroquine, or Lipinavir/ritonavir	Several primary outcomes are stated: length of stay, mortality and other	Recruiting; From2020-02-12 To 2020-12-31	Low
Chloroquine	ChiCTR2000029740 http://www.chictr.org.cn/showproj.aspx?proj=49317	Tongji hospital, Hubei, China	Open label COVID-19 Randomised to hydroxychloroquine 0.2 mg bid (n=52), or conventional therapy (n=24)	Oxygen index, respiratory rate, lung radiography, lymphocyte count at sees 1,2,3,and 4.	Recruiting From2020-02-11 To 2020-02-29	Low
Chloroquine	ChiCTR2000029868 http://www.chictr.org.cn/showproj.aspx?proj=49524	Hubei, China	a multicenter, randomised controlled trial N=200 with mild covid-19 randomised to hydroxychloroquine or conventional treatment	Viral nucleic acid test	Recruiting; From2020-02-06 To 2020-07-31	Low
Chloroquine	ChiCTR2000029939 http://www.chictr.org.cn/showproj.aspx?proj=49612	Zhejiang, China	Single-blind, Randomised, Controlled Clinical Trial N=100 patients with covid-19 (severity unknown), randomised to chloroquine phosphate or placebo	Length of hospital stay	Recruiting; From2020-02-06 To 2021-02-06	Low
Chloroquine	ChiCTR2000029935 http://www.chictr.org.cn/showproj.aspx?proj=49607	Zhejiang, China	Single arm study, N=100 patients with covid-19 (severity unknown), treated with chloroquine phosphate	Length of hospital stay	Recruiting; From2020-02-06 To 2021-02-06	Low
Hydroxychloroquine sulfate vs phosphate chloroquine	ChiCTR2000029899 http://www.chictr.org.cn/showproj.aspx?proj=49536	Hubei, China	Randomised, Open-label, Parallel, Controlled Trial N=100 with mild or moderate covid-19 randomised to Hydroxychloroquine sulfate, or phosphate chloroquine	Time to clinical recovery (time frame 28 days)	Recruiting; From2020-02-17 To 2020-04-30	Low
Hydroxychloroquine sulfate vs phosphate chloroquine	ChiCTR2000029898 http://www.chictr.org.cn/showproj.aspx?proj=49482	Hubei, China	Randomised, Open-label, Parallel, Controlled Trial N=100 with severe covid-19 randomised to Hydroxychloroquine sulfate, or phosphate chloroquine	Time to clinical improvement (time frame 28 days)	Recruiting; From2020-02-17 To 2020-04-30	Low
Hydroxychloroquine sulfate vs phosphate chloroquine	ChiCTR2000029992 http://www.chictr.org.cn/showproj.aspx?proj=49574	Hubei, China	Randomised, Open-label, Parallel, Controlled Trial N=100 with severe covid-19 randomised to	Clinical recovery time (6-point scale); Changes in viral load of upper and lower respiratory tract	Not yet recruiting; From2020-02-17 To 2020-05-20	Low

			Hydroxychloroquine sulfate (n=40), or phosphate chloroquine (n=40), or routine treatment (n=20)			
Chloroquine phosphate	ChiCTR2000029988 http://www.chictr.org.cn/showproj.aspx?proj=49218	Hubei, China	Open label clinical trial. N=80 patients with severe covid-19 randomised to chloroquine phosphate or no treatment	Time to clinical recovery	Recruiting; From2020-02-13 To 2020-05-31	Low
Chloroquine phosphate aerosol inhalation	ChiCTR2000029975 http://www.chictr.org.cn/showproj.aspx?proj=49592	Jilin, China	Single arm study of 10 patients; severity is not defined.	Viral negative-transforming time; 30-day cause-specific mortality	Not yet recruiting; From2020-02-24 To 2020-05-31	Low
Hydroxychloroquine sulfate vs chloroquine phosphate	ChiCTR2000030054 http://www.chictr.org.cn/showproj.aspx?proj=49869	Hubei, China	Randomised, Open-label, Parallel, Controlled Trial N=100 with mild or moderate covid-19 randomised to Hydroxychloroquine sulfate (n=40), or phosphate chloroquine (n=40), or routine treatment (n=20)	Clinical recovery time, time frame 28 days	Not yet recruiting; From2020-02-17 To 2020-05-21	Low
Chloroquine	ChiCTR2000029803 http://www.chictr.org.cn/showproj.aspx?proj=49428	Hubei, China	Prevention. Prospective, randomised, open-label, controlled clinical study to evaluate the preventive effect of hydroxychloroquine on close contacts after exposure (COVID-19) 320 patients randomised to hydroxychloroquine small dose, high dose, abidol small dose or abidol high dose.	Number of patients who have progressed to suspected or confirmed within 24 days of exposure to new coronavirus	Not yet recruiting; From2020-02-20 To 2021-02-20	Low
Chloroquine phosphate inhalation	ChiCTR2000030417 http://www.chictr.org.cn/showproj.aspx?proj=50279	Heilongjiang, China	Randomised controlled trial. N=30 patients with covid-19 randomised to chloroquine phosphate aerosol inhalation or water for injection atomization inhalation	Several primary outcomes: Temerature, respiratory symptoms improvement, pulmonary imaging improvement, negative virus test	Not yet recruiting From2020-03-01 To 2020-06-30	Low
Chloroquine	ChiCTR2000029542 http://www.chictr.org.cn/showproj.aspx?proj=48968	Guangdong, China	Phase 4, open label, non-randomised N=20 with covid-19 Treatment: chloroquine or conventional treatment	Viral negative-transforming time, 30-day cause specific mortality	Recruiting From2020-02-03 To 2020-07-30	Low
Hydroxychloroquine + Vitamins A, C, D and Zinc	NCT04326725	Turkey	Proflaxis for Healthcare Professionals Using Hydroxychloroquine Plus Vitamin Combining Vitamins A, C, D and Zinc During COVID-19 Pandemia: An Observational Study	No infection within 4 months	Recruiting; Estimated Primary Completion: July 1, 2020	Low
~~Hydroxychloroquine~~	~~ChiCTR2000029760~~	~~Chongqing~~	~~Randomised controlled study N=240 Patients with mild or moderate infectious disease~~	~~Time to clinical recovery~~	~~Cancelled due to lack of patients~~	~~Low~~

	http://www.chictr.org.cn/showproj.aspx?proj=49369					
Chloroquine	ChiCTR2000029762 http://www.chictr.org.cn/showproj.aspx?proj=49404	Chongqing, China	60 patients with severe covid-19	Negative conversion rate of COVID-19 nucleic acid Lung inflammation absorption ratio	Cancelled due to lack of patients	Low
Chloroquine	ChiCTR2000029761 http://www.chictr.org.cn/showproj.aspx?proj=49400	Chongqing, China	240 patients randomised to 3 different doses of hydroxychloroquine or conventional treatment	Negative conversion rate of 2019-nCoV nucleic acid Lung inflammation absorption ratio	Cancelled due to lack of patients	Low
Dihydroartemisinine piperaquine (Eurartesim) Indicated for the treatment of uncomplicated Plasmodium falciparum malaria	ChiCTR2000030082 http://www.chictr.org.cn/showproj.aspx?proj=49915		Randomised open label, controlled trial Mild to commen covid-19 randomised to dihydroartemisinin piperaquine tablets combined with antiviral treatment, or alpha-interferon and Ardibdol	The time when the nucleic acid of the novel coronavirus turns negative	Recruiting; From2020-02-23 To 2020-04-30	Low
Aviptadil Synthetic version of Vasoactive Intestinal Polypeptide Sponsor: NeuroRx, Inc.	NCT04311697	New York, New York, US Haifa, Israe	PHase 2 double blinded randomised trial. N=120 patients, intubated and on maximal conventional medial therapy are randomised to Intravenous Aviptadil or placebo	Mortality [Time Frame: 5 Days with followup through 30 days	March 17, 2020 Estimated study completion: August 2020	High
PUL-042. Toll like receptor 2/6/9 Agonist In a phase 2 study in stem cell transplant recipients. Sponsor: Pulmotect, Inc.	NCT04313023	Not yet provided	A Phase 2 Multiple Dose, Double blinded, placebo-controlled study. N=200 exposed patients (without COVID-19) randomised to PUL-042 or placebo	Prevention of COVID-19 [Time Frame: 14 days]	Not yet recruiting. Estimated Study Completion: October 2020	High
PUL-042. Toll like receptor 2/6/9 Agonist In a phase 2 study in stem cell transplant recipients. Sponsor: Pulmotect, Inc.	NCT04312997	Houston, Texas, US	A Phase 2 Multiple Dose Double blinded, placebo controlled study. N=100 with COVID-19 without severe symptoms randomised to PUL-042 or placebo	Ordinal Scale for Clinical Improvement (score 1-8) [Time Frame: 14 days]	Not yet recruiting. Estimated Study Completion: October 2020	High
Camostat mesylate	NCT04321096 EudraCT: 2020-001200-42	Denmark, at hospitals across DK	A multicenter, randomised, double blinded, placebo-controlled trial N=180 randomised to Camostat mesylate, or placebo	Days to clinical improvement from study enrolment [Time Frame: 30 days]	Not recruiting; Estimated Primary Completio: December 31, 2020	High

Licensed for pancreatitis and reflux esophagitis after gastrectomy in Japan						
Ebastine H1 antagonist	ChiCTR2000030535 http://www.chictr.org.cn/showproj.aspx?proj=49790	Hubei, China	Single blind, multicenter, randomized, parallel controlled tria N= 100 patients with mild to severe covid-19 randomised to Ebastine + interferon-alpha aerosol inhalation + lopinavir, or interferon-alpha aerosol inhalation + lopinavir	Several primary outcomes: Fever, respiratory rate, blood oxygen saturation turned to normal and cough relieved for at least 72 hours.	Recruiting; From2020-02-20 to 2020-03-30	Medium
Azithromycin	NCT04332107	United States, California	Double blinded placebo controlled randomized trial. N=2271 non-hospitalised patients with mild or moderate COVID-19 randomised to azithromycin or placebo	Hospitalization [Time Frame: 14 days]	Not yet recruiting; Estimated Primary Completion: July 30, 2020	High
Itraconazole Sponsor: UZLeuven	2020-001243-15	Belgium	Randomised, open label trial. N= 200 hospitalized patients randomized to itraconazole or standard of care	Clinical status of subject at day 15 (on a 7-point ordinal scale)	Ongoing	Medium
Thalidomide Sponsor: First Affiliated Hospital of Wenzhou Medical University	NCT04273581	China	Prospective, Multicenter, Randomised, Double-blind, Placebo, Parallel Controlled Clinical Study N=40, Severe Covid-19 randomised to thalidomide or placebo	Time to Clinical Improvement (TTCI) (Time Frame: up to 28 days)	Not yet recruiting; May 30, 2020	Medium
Thalidomide; Sponsor: First Affiliated Hospital of Wenzhou Medical University	NCT04273529	China	Phase 2 study, prospective, Multicenter, Randomised, Double-blind, Placebo, Parallel Controlled Clinical Study N=100 moderate Covid-19 randomised to thalidomide, or placebo	Time to Clinical Recovery (TTCR) (Time Frame: up to 28 days)	Not yet recruiting, Estimated study completion date: June 30, 2020	Medium
Bismuth potassium citrate	ChiCTR2000030398 http://www.chictr.org.cn/showproj.aspx?proj=50173	Hubei, China	A randomized, double-blind, placebo-controlled trial N=340 randomised 1:1 to bismuth potassium citrate or	Conversion rate at day 15	Not yet recruiting	Medium
Nitrogen oxide Sponsor: Xijing Hospital	NCT04290858	Xijing Hospital Massachusetts General Hospital Fondazione IRCCS Ca' Granda, Ospedale	Double blinded randomised trial N=400 with covid19 with fever, resp. rate>24 or sat>93% randomised to NO	Sp=2<93%, , intubation, ECMO	Not yet recruiting; Estimated study completion: March 1 2021	Medium

		Maggiore Policlinico				
Nitrogen oxide Sponsor: Xijing Hospital	NCT04290871	Xijing Hospital Massachusetts General Hospital Fondazione IRCCS Ca' Granda, Ospedale Maggiore Policlinico	Phase 2 study; Double blinded, sham controlled randomised trial N=104 with covid19 with PaO2/FiO2 < 300 or SpO2 below 93% breathing ambient air randomised to NO or sham NO	SARS-free patients at 14 days [Time Frame: 14 days since beginning of treatment] Percentage of patients that have a PaO2/FiO2 ratio steadily > 300 in ambient air	Not yet recruiting; Estimated study completion: March 1 2021	Medium
Nitrogen oxide; Sponsor: Massachusetts General Hospital	NCT04305457	Xijing Hospital Massachusetts General Hospital Fondazione IRCCS Ca' Granda, Ospedale Maggiore Policlinico	Phase 2 randomised open label trial N=240 with mild covid-19 Randomised to NO or no intervention	Reduction in intubation and mechanical ventilation (time frame 28 days)	Not yet recruiting; Estimated primary completion date/study completion:April 2021/ April 2022	Low
Nitrogen oxide; Sponsor: Massachusetts General Hospital	NCT04306393	Xijing Hospital Massachusetts General Hospital Fondazione IRCCS Ca' Granda, Ospedale Maggiore Policlinico	Phase 2 randomised open label trial N=200 with severe covid-19 randomised to NO or no intervention	Change of arterial oxygenation at 48 hours from enrollment [Time Frame: 48 hours]	Not yet recruiting; Estimated primary completion date/study completion:March 2021/ March 2022	Low
Nitrogen oxide; Sponsor: Massachusetts General Hospital	NCT04312243	Xijing Hospital Massachusetts General Hospital Fondazione IRCCS Ca' Granda, Ospedale Maggiore Policlinico	Preventive study: Phase 2 open label trial of 460 healthcare workers.	Percentage of subjects with COVID-19 diagnosis	Not yet recruiting; Estimated primary completion date/study completion:March 2021/ March 2022	Low
Hydrogen-oxygen nebulizer	ChiCTR2000029739 http://www.chictr.org.cn/showproj.aspx?proj=49283	Guangdong and Shanghai	Multicenter, Randomised, Parallel Controlled Clinical Study	Worsening or improving of condition	Recruiting; From2020-02-01 To 2021-08-31	Low

			N=440 patients with moderate covid-19 randomised to Hydrogen-oxygen nebulizer or conventional treatment			
Nutrients Vitamin C Sponsor: ZhiYong Peng	NCT04264533	China, Hubei	Phase 2, blinded N=140 patients with serious or critical covid-19 randomised to vitamin C IV, or placebo	Ventilation-free days	Recruiting; Sep 30, 2020,	Medium
Vitamin C 0.5 g + diammonium glycerrhizinate enteric coated capsules 150 mg t.i.d.	ChiCTR2000029768 http://www.chictr.org.cn/showproj.aspx?proj=49131	Hubei, China	A randomised, open, controlled trial N=60 patients with covid-19	Time to Clinical recovery	Recruiting; From2020-02-12至To 2020-05-12	Low
Vitamin C	ChiCTR2000029957 http://www.chictr.org.cn/showproj.aspx?proj=49633	Shaanxi and Hubei, China	Case series, observational study of 56 patients with severe or critical covid-19	Ventilation-free days; mortality;	Not yet recruiting; From2020-02-24 To 2021-02-28	Low
Vitamin C	ChiCTR2000030135 http://www.chictr.org.cn/showproj.aspx?proj=50002	Hubei and Shaanxi, China	Randomised trial, Blinding not stated; Severe or critical covid-19 patients High dose vitamin: N=26 Routine treatment: N=13	Ventilation free days; Mortality	Not yet recruiting; From2020-02-25 To 2021-02-28	Low
Vitamin C intravenous	NCT04323514	Italy	Single arm, open label. N=500 patients with COVID-19	In-hospital mortality	Recruiting; Estimated Primary Completion: March 2021	Low
Vitamin D	NCT04334005	Granada, Spain	Randomised double-blinded controlled trial N=200 patients with Non-severe symptomatic patients who present cough, fever, nasal congestion, gastrointestinal symptoms, fatigue, anosmia, ageusia or alternative signs of respiratory infections.	Composite of cumulative death for all causes and for specific causes. [Time Frame: 10 weeks]	Not yet Recruiting; Estimated Primary Completion: March 2021	Medium
Alpha lipoic acid	ChiCTR2000029851 http://www.chictr.org.cn/showproj.aspx?proj=49534		N=68 with severe covid-19 randomised to alpha lipoic acid or placebo	SOFA	Recruiting; From2020-02-19 To 2020-03-10	Low
Lipoic acid	http://www.chictr.org.cn/showproj.aspx?proj=50421	Guangdong and Hubei, China	Parallel single blind study. N=394 randomised to lipoic acid or blank control	Progression rate from mild to critical/severe	Recruiting; From2020-03-02 To 2020-04-30	Low
Oral nutrition supplement (ONS) enriched in eicosapentaenoic acid,	NCT04323228	Saudi Arabia	Double-blinded, randomised controlled trial. N=30 randomised to	Several primary outcomes: Nutrition risk screening, serum ferritin, IL-6, CRP, TNFa, MCP-1 r	Not yet recruiting;	Low

gamma-linolenic acid and antioxidants			enriched ONS or isocaloric/isonutrigenous ONS		Estimated Primary Completion: October, 2020	
Microbiota	NCT04251767	China, Jiangsu	Washed Microbiota Transplantation in Patients With covid19. Quadruple blinded. N=40 patients with severe infection randomised to Washed microbiota suspension delivered through nasogastric tube, nasojejunal tube or oral, combining with standard therapy, or Placebo	Number of participants with improvement from severe type to common type (Time Frame: 2 weeks)	Enrolling by invitation; Estimated study completion: April 16, 2020	Low
Probiotics	ChiCTR2000029974 http://www.chictr.org.cn/showproj.aspx?proj=49321	Shandong, China	A prospective, multicenter, open-label, randomised, parallel-controlled trial. N=300 patients with mild to severe covid-19 randomised to live Clostridium Butyricum Capsules and Live Bacillus Coagulans Tablets for 14 days	Time to Clinical recovery	Recruiting; From2020-02-09 To 2020-08-31	Low
Dipyridamidole	ChiCTR2000030055 http://www.chictr.org.cn/showproj.aspx?proj=49864	Guangdong, Hubei, Zhejiang ,China	Phase 4, blinding not stated. N=460 patients with suspected corona infection but not 2019-nCoV pneumonia patients… Randomised to dipyridamole, or Conventional treatment	Several primary outcomes	Recruiting; From2020-02-10 To 2020-04-10	Low
GD31 Nucleoside analog	ChiCTR2000029895 http://www.chictr.org.cn/showproj.aspx?proj=49569	Guangdong, China	Single arm, N=160	The negative conversion rate and negative conversion time of novel coronavirus nucleic acid	Recruiting; From2020-02-16 To 2020-12-31	Low
Suramin sodium Used for treatment of trypanosomiasis	ChiCTR2000030029 http://www.chictr.org.cn/showproj.aspx?proj=49824	Zhejing, China	Single arm study of 20 patients with covid-19.	Clinical cure rate, incidence of mechanical ventilation by day28; All-cause mortality by day28; Incidence of ICU admission by day28	From2020-01-31 To 2020-05-30	Low
CMAB806	ChiCTR2000030196 http://www.chictr.org.cn/showproj.aspx?proj=49883	Hubei, China	Phase 2, a multicenter, single arm, open label trial N=60 with moderate or severe covid-19 with elevated IL6	Relive of cytokine release syndrome	Not yet recruiting; From2020-02-20 To 2020-05-31	Low
Acetylcystein Inhaled	ChiCTR2000030328 http://www.chictr.org.cn/showproj.aspx?proj=50241	Hubei, China	Clinical trial, blinding not stated. N=60 with moderate covid-19 treated with either Acetylcysteine inhaled via tracheal tube or saline inhaled via tracheal tube	Wide range of primary outcomes	Not yet recruiting End-date not specified	Low
Sildenafil	NCT04304313	Hubei, China	Phase 3, pilot study, single arm study N=10	Rate of disease remission Rate of entering the critical stage Time of entering the critical stage	Recruiting; November 9, 2020	Low

				Time frame 14 days		
Nebulized amniotic fluid University of Utah	NCT04319731	Not provided	Phase 1 study Single arm study N=10	Ventilator Free Days [	Not yet recruiting Estimated primary completion March 20, 2021	Low
Escin	NCT04322344	Italy	Non-randomised double blinded trial N=120 patients with Treated with either high dose escin, low dose escin or standard therapy	All cause mortality Clinical status	Recruiting; Estimated Primary Completion: June 30, 2020	Low
CytoSorb Cytokine absorption	NCT04324528	Germany	Open label randomized controlled trial. N=30 critically ill patients randomized to ECMO +/- cytokine absorption	interleukin-6 (IL-6) level after 72 hours	Recruiting, Estimated Primary Completion: September 26, 2020	Medium
Tradipitant (VLY-686 or LY686017) is an experimental drug that is a neurokinin 1 antagonist. It works by blocking substance P, a small signaling molecule.	NCT04326426	Not stated	Phase 3 Randomized, Double-blind, Placebo-controlled Study N=300 COVID-19 patients with Oxygen saturation less than 92% randomized to tradipitant or placebo	Proportion of participants with normalization of fever and oxygen saturation by day 14	Not yet recruiting; Estimated Primary Completion: August 1, 2020	High
Levamisole + budesonide + formoterol Sponsor: Fasa University of Medical Sciences	NCT04331470	Not stated	Open label, randomized controlled trial. N=30 patints with COVID -19 randomised to Levamisole + budesonide + formoterol + Lopinavir+Ritonavir + Hydroxychloroqine, or Lopinavir+Ritonavir + Hydroxychloroqine	Clear chest CT-scan and PCR test [Time Frame: between 3-7 days]	Not yet recruiting; Estimated Primary Completion: April 20, 2020	Low
Deferoxaminmesilat (Desferal) iron chelator	NCT04333550	Iran, Islamic Republic of	Randomised trial. N=50 randomised to Deferoxamine or standard of care	Mortality rate [Time Frame: up to 20 days]	Recruiting; Estimated Primary Completion: September 2020	Low

Link to WHO´s list of studies for the treatment of COVID-19, updated March 21st 2020:
https://www.who.int/blueprint/priority-diseases/key-action/Table_of_therapeutics_Appendix_17022020.pdf?ua=1